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ABSTRACT

This annotated listing provides brief descriptions of the 591 projects funded during 1991 by federal set-aside funds of the Maternal and Child Health (MCH) Services Block Grant and identified as special projects of regional and national significance (SPRANS). Preliminary information includes an introduction, an organization chart of the Maternal and Child Health Bureau, and a glossary of commonly used acronyms. Listings typically include title of project, address, contact person and phone number, and an annotation focusing on project goal and major activities. Topic categories are maternal health, infant health, child health, children with special health needs, adolescent health, and general program concerns. Specific topics of projects include the following: content and utilization of prenatal care; risk reduction in pregnancy; systems development for perinatal services; reducing mortality and morbidity (infants); newborn screening and/or follow-up; breastfeeding and infant nutrition; parenting; primary care/preventive health services (child health); health and safety in child care settings; emergency medical services; lead poisoning prevention; violence/injury prevention; early childhood intervention; family-centered, community-based, comprehensive services (children with special health needs); chronic illness, disabling conditions; technology dependent, medically fragile; Colley's Anemia, Thalassemia; Hemophilia/AIDS (Acquired Immune Deficiency Syndrome); primary care/preventive health services (adolescents); violence/injury prevention (adolescents); youth in transition; state staff development; MCH/Public Health professional development; program coordination and networking; financing; data/information; and overcoming ethnocultural barriers to genetic services. Indexes to project titles, grantee names, locations, and subjects are provided. (DB)

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ED346656

Maternal and Child Health Bureau Active Projects FY 1991

An Annotated Listing

National Center for Education in Maternal and Child Health

EC 301268

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Maternal and Child Health Bureau
Active Projects FY 1991

An Annotated Listing

National Center for Education in Maternal and Child Health
Washington, DC

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Preface

Under authority of Title V of the Social Security Act, up to 15 percent of the Maternal and Child Health Services Block Grant may be set aside for the Federal Government to support certain categorical programs referred to as special projects of regional and national significance (SPRANS).

These funds are used to support applied research to expand our knowledge of and broaden our approach to health problems. They are used to support the training of specialized health professionals, upgrade the skills of leadership personnel, develop standards of care, and otherwise improve the quality of maternal and child health services. They support programs to test, counsel, and refer individuals at risk for having or transmitting genetic disorders. They support a regionalized system of comprehensive care for individuals with hemophilia, which can be a model of care for others with chronic disabling diseases. These set-aside dollars support projects that design and test innovative ways to deliver services to mothers, infants, children, and adolescents to prevent illness or injury and maximize their health. They also support the development of systems of services to provide early and effective treatment for handicapped or chronically ill children and enhance a family's ability to care for a child with special health needs.

In fiscal year 1991, the Maternal and Child Health Bureau (MCHB) supported 591 SPRANS grants. This annotated listing, an annual publication of the National Center for Education in Maternal and Child Health (NCEMCH), provides brief descriptions of each such project. It is based on the project reports in the MCHB annual publication, *Abstracts of Active Projects*, and additional information provided by the SPRANS. It has been produced in order to disseminate information to individuals interested in the field of maternal and child health. NCEMCH wishes to thank MCHB and the SPRANS for providing information on current projects.

The full project report for a given SPRANS may be obtained from NCEMCH. Further information may be requested from individual projects. The name, address, and telephone number of a contact person for each project are also provided.

Introduction

Through most of the 20th century, the Federal Government has played an important role in assuring and safeguarding the health of our Nation's children. The Children's Bureau, which was established in 1912 to "investigate and report . . . upon all matters pertaining to the welfare of children and child life among all classes of our people," was the agency from which the Maternal and Child Health Bureau (MCHB) emerged. Among the issues the Children's Bureau was instructed to look into were "the questions of infant mortality, the birth rate, orphanage, desertion . . . accidents and diseases of children . . . and legislation affecting children in the several States and territories." From these early inquiries flowed a wealth of information and new knowledge which influenced States to modernize their laws and encouraged the child health community to develop and improve services for mothers and children.

The first Federal grants-in-aid to the States for infant and maternal health came a decade later, authorized by the Sheppard-Towner Act of 1921, and administered by the Children's Bureau. The plans under which the States used these funds originated in the States and varied greatly, but as a result of widespread discussion of the whole question of maternity and child care the States began a number of new programs which resulted in continued improvement in the health of mothers and children.

Title V of the Social Security Act, enacted in 1935, created the first Federal-State partnership in maternal and child health. Federal funds were provided for three types of work in the States: Maternal and Child Health Services, Crippled Children's Services, and Child Welfare Services. For the most part, the States provided the services which were paid for by a combination of Federal dollars and matching State dollars, and the Federal Government provided leadership to the program. The program was amended over the years to allow it to respond to significant changes in the Nation. Among these were the large numbers of women entering the workforce during World War II with the resulting need for day care programs for infants and children, development of new technologies which extended the lives of premature infants, medical advances in the treatment and prevention of handicapping conditions, the postwar trend to urbanization, and the shortage and maldistribution of skilled health professionals.

Another significant change to Title V came in 1981 with creation of the Maternal and Child Health Services Block Grant. In 1990, more than $553 million was appropriated for this program, 85 percent of which went directly to the States. With these funds and their own matching resources, the States provide a variety of services from well-child clinics to family planning, immunizations to lead poisoning prevention, community-based services for children with special health needs to other services for low-income and minority women and children and those who might have no other access to services.

The remainder, known as the Federal set-aside, is used by the Federal Government to support special projects of regional or national significance (SPRANS), which include research; training; hemophilia diagnosis and treatment; genetic diseases screening, counseling, and referral; and maternal and child health improvement projects which demonstrate and test a variety of approaches intended to improve the health of and services delivered to mothers, infants, children, adolescents, and children with special health needs. Additional funds are available through which the Maternal and Child Health Bureau provides support for pediatric AIDS health care demonstration projects and for emergency medical services for children.

These projects offer the promise of more effective ways to organize and deliver services, of new and different services to address both the old and the new morbidities, and of techniques for outreach to high-risk populations so that they can receive appropriate care. They expand knowledge and develop the leadership for maternal and child health programs across the country. MCHB-funded projects are not usually looking for "magic bullets" to conquer disease; rather, they seek significant, sustained, systemic changes that will have long-term impacts on the health status of mothers and children.

Often the issues these projects address have been public health priorities for decades. Infant mortality is such an issue. The Maternal and Child Health Bureau is encouraging creativity and new approaches in its quest for effective programs and knowledge that will enable our Nation to accelerate the decline in infant mortality and eliminate the racial disparity in infant mortality rates. It is funding projects that are designed to strengthen and restructure the perinatal care delivery system, to outreach and bring at-risk women into early prenatal care, to evaluate the components of prenatal care, to look at infant mortality events in order to isolate risk factors, to teach and reinforce parenting skills. Of special current concern are the societal ills which have an adverse impact on birth outcomes—conditions such as homelessness and substance abuse. In collaboration with the Office for Substance Abuse Prevention in the Alcohol, Drug Abuse and Mental Health Administration, MCHB is supporting about 100 projects for drug-using women and their families—to educate them about the hazards drugs present to the developing fetus, to get them off drugs through appropriate treatments, and to build their coping and parenting abilities so that they do not return to drugs. Some of these projects focus on the affected children and appropriate interventions to overcome the deficits they may experience.

These projects are among the 591 reported in this book which were receiving funding at the beginning of fiscal year 1991. In order to be funded, each of these projects was reviewed by panels of professionals knowledgeable in their fields, rated highly, and recommended for approval.

In research, the Maternal and Child Health Bureau supports projects which are intended to develop new knowledge and the application of such knowledge to the health problems of mothers, children, and children with special health needs. Research grants may be made only to public or nonprofit private institutions of higher learning, or to nonprofit agencies and organizations engaged in research or in maternal and child health or programs for children with special health needs.

Training grants are available for long-term training or for continuing education by public or nonprofit private institutions of higher learning. These funds are focused on: Providing leadership training in a variety of specialized health professions, as well as interdisciplinary training required to provide comprehensive maternal and child health care; providing specialized clinical or laboratory training and services not routinely available; providing professional consultation and technical assistance in connection with training activities; and upgrading skills and competencies of State and local MCH personnel.

Any public or private entity, nonprofit or for-profit, may apply for genetic disease testing and counseling grants, hemophilia diagnosis and treatment center grants, maternal and child health improvement project grants, and pediatric AIDS health care demonstration projects.

The genetics grants provide for the testing, counseling, and referral of individuals at risk for having or transmitting genetic disorders through broad-based, noncategorical, and readily accessible centers on a statewide or regional basis. Linkages of grantees with maternal care and family planning services extend testing and counseling services to additional persons in their childbearing years.

The hemophilia grants support development of regional programs with linkages to private clinicians, State Title V programs, and other resources and serve as a demonstration model for issues relating to regionalization of other chronic and handicapping conditions. Hemophilia is a low prevalence disease which requires a disproportionate amount of health care dollars and resources; regionalization of care is desirable to achieve quality assurance and cost control.

Maternal and child health improvement project (MCHIP) grants support projects which demonstrate how State and local agencies and organizations can improve the health status of mothers and children through the creative modification of their health care systems. For example, they may explore the effectiveness of outreach techniques, apply innovative methods to identify individuals at risk, develop early and effective intervention techniques, or more effectively use primary providers and specialty services. They may develop systems to gather, analyze, disseminate, and store data and information so as to increase their use by any part of the maternal and child health community. Successful methods developed by MCHIP grantees should be replicable elsewhere in the Nation.

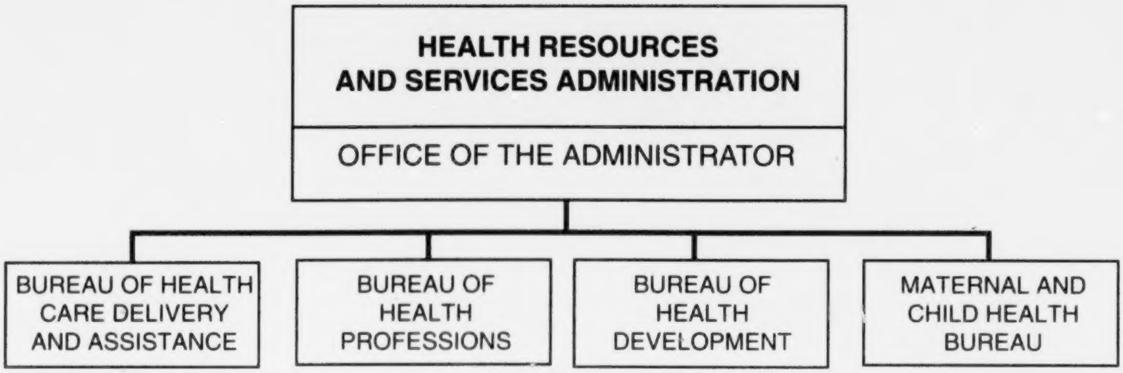
The pediatric AIDS health care projects demonstrate effective ways to prevent infection, especially by reducing perinatal transmission and by reducing the spread to vulnerable groups of young people, and develop innovative programs for managing pediatric patients with AIDS which can serve as models for other communities. They also provide leadership and expertise for national issues associated with this epidemic.

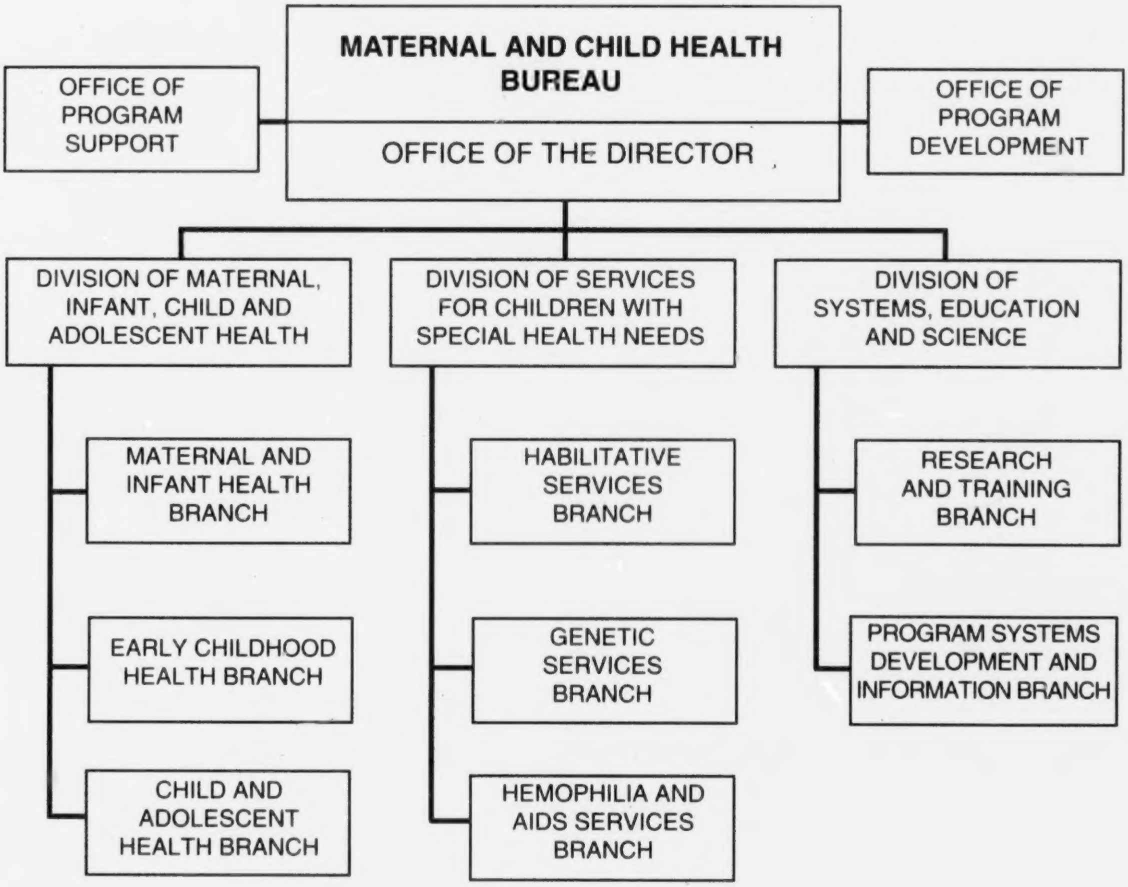
The emergency medical services (EMS) for children demonstration program is intended to improve the pediatric capacity of existing EMS systems in individual communities. State agencies or medical schools within a State are eligible for the grants. The program is designed to develop and use a body of knowledge about the characteristics of pediatric emergencies, the training of EMS personnel, and other necessary adaptations of the EMS system to handle pediatric emergencies. The program is also assisting all States and jurisdictions to incorporate this information into their EMS systems.

Each year the Maternal and Child Health Bureau publishes in the *Federal Register* requests for grant applications, giving specific dates and procedures for applying. At that time, and in guidance material distributed to prospective grantees, it indicates priorities for funding and the issues which are of paramount concern to the program.

The Maternal and Child Health Bureau invites potential applicants to inquire about application requirements for the particular categories in which they are interested and then to apply for funding. Inquiries about possible grant support, technical assistance, or programmatic information should be addressed to the Director, Maternal and Child Health Bureau, Room 18A-55, Parklawn Building, 5600 Fishers Lane, Rockville, Maryland 20857.

The Maternal and Child Health Bureau has important alliances with professional, voluntary, and private organizations as well as public health agencies at all levels through which information is shared and collaboration is forged. These efforts are undertaken by MCHB so that the knowledge gained from projects it supports will be incorporated into prevention programs and comprehensive services provided by both private practitioners and the public sector, with beneficial results for the health of our Nation's mothers and children.


HEALTH RESOURCES AND SERVICES ADMINISTRATION
OFFICE OF THE ADMINISTRATOR
BUREAU OF HEALTH CARE DELIVERY AND ASSISTANCE
BUREAU OF HEALTH PROFESSIONS
BUREAU OF HEALTH DEVELOPMENT
MATERNAL AND CHILD HEALTH BUREAU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OFFICE OF PROGRAM SUPPORT
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DIVISION OF MATERNAL, INFANT, CHILD AND ADOLESCENT HEALTH
MATERNAL AND INFANT HEALTH BRANCH
EARLY CHILDHOOD HEALTH BRANCH
CHILD AND ADOLESCENT HEALTH BRANCH
DIVISION OF SERVICES FOR CHILDREN WITH SPECIAL HEALTH NEEDS
HABILITATIVE SERVICES BRANCH
GENETIC SERVICES BRANCH
HEMOPHILIA AND AIDS SERVICES BRANCH
DIVISION OF SYSTEMS, EDUCATION AND SCIENCE
RESEARCH AND TRAINING BRANCH
PROGRAM SYSTEMS DEVELOPMENT AND INFORMATION BRANCH

Glossary of Commonly Used Acronyms

AAP—American Academy of Pediatrics
AAUAP—American Association of University Affiliated Programs for Persons with Developmental Disabilities
ACCH—Association for the Care of Children's Health
ACOG—American College of Obstetricians and Gynecologists
AFDC—Aid to Families with Dependent Children
AIDS—Acquired Immune Deficiency Syndrome
AMCHP—Association of Maternal and Child Health Programs
ANA—American Nurses' Association
AZT—Azidothymidine
BIA—Bureau of Indian Affairs
CCS—Crippled Children's Services
CDC—Centers for Disease Control
CF—Cystic Fibrosis
CHC—Community Health Center
CORN—Council of Regional Networks for Genetic Services
CSHCN—Children with Special Health Care Needs
CSHN—Children with Special Health Needs
DHHS—Department of Health and Human Services
EMS—Emergency Medical Services
EMSC—Emergency Medical Services for Children
EMT—Emergency Medical Technician
EPSDT—Early and Periodic Screening, Diagnosis and Treatment
HCFA—Health Care Financing Administration
HIV—Human Immunodeficiency Virus
HMHB—Healthy Mothers, Healthy Babies Coalition
HMO—Health Maintenance Organization
HRSA—Health Resources and Services Administration
IEP—Individualized Education Plan
IFSP—Individualized Family Service Plan
IHS—Indian Health Service
IMR—Infant Mortality Rate
MARHGN—Mid-Atlantic Regional Human Genetics Network
MCH—Maternal and Child Health
MCHB—Maternal and Child Health Bureau
MCHIP—Maternal and Child Health Improvement Project
MR—Mentally Retarded
NICHD—National Institute of Child Health and Human Development
NIH—National Institutes of Health
NIMH—National Institute of Mental Health
OB/GYN—Obstetrics and Gynecology
OSAP—Office for Substance Abuse Prevention
PHN—Public Health Nurse
PKU—Phenylketonuria
P.L.—Public Law
PPC—Pediatric Pulmonary Center
PSA—Public Service Announcement
RD—Rheumatic Disease
RFP—Request for Proposal
SIDS—Sudden Infant Death Syndrome
SOBRA—Sixth Omnibus Budget Reconciliation Act (1986)
SPRANS—Special Projects of Regional and National Significance
SSA—Social Security Administration
SSI—Supplemental Security Income
UAP—University Affiliated Program
WIC—Special Supplemental Food Program for Women, Infants and Children

Maternal Health

Prenatal Care: Content and Utilization

Nutritional Status During Pregnancy and Lactation
National Academy of Sciences, Institute of Medicine
2101 Constitution Avenue, N.W.
Washington, DC 20418
(202) 334-1917

MCHIP
MCJ-117018
10/01/90–09/30/92
Project Director(s):
Carol West Suitor, D.Sc., R.D.

The goals of this project are to produce and disseminate a clinical applications guide concerning nutrition during pregnancy and lactation, to revise and disseminate the 1981 publication *Nutrition Services in Perinatal Care*, and to participate in other dissemination activities related to the Institute of Medicine publications *Nutrition During Pregnancy* and *Nutrition During Lactation*. Published copies of the clinical applications guide and the revision of Nutrition Services are targeted to be available late in 1991. These reports will be based on new information presented in the recent publications from the Food and Nutrition Board.

Jackson County Prenatal Clinic
Region II Community Action Agency
154 West Clark Street
Jackson, MI 49203
(517) 788-6010

MCHIP
MCJ-268515
10/01/90–09/30/95
Project Director(s):
Marsha Kreucher

This project has established goals to: (1) Bring Jackson County into compliance with the Michigan Department of Public Health mandate that prenatal care is a basic right of every woman; and (2) reduce the infant mortality rate to the goal specified by the Surgeon General (i.e., 9 deaths per 1,000 live births). To reduce the infant mortality rate by providing access to prenatal care, a maternal and infant health care clinic will be established which will provide a full range of prenatal, postpartum, and infant care services, utilizing a multidisciplinary approach. Clinical services will be rendered in accordance with appropriate professional standards. Services will be primarily available to Jackson County residents without insurance or with inadequate insurance such as Medicaid. Services will also be available to those unable to receive services elsewhere.

Body Composition in Pregnant Women
Columbia University
Center for Population and Family Health
60 Haven Avenue
New York, NY 10032
(212) 304-5251

Research
MCJ-360601
10/01/90–09/30/93
Project Director(s):
Sally Ann Lederman, Ph.D.

This project is a prospective, longitudinal study of nutritionally important body composition changes occurring during pregnancy in black and white nonsmokers ages 19 to 35. The project will use recruitment sites and procedures developed in a prior study to recruit over 200 pregnant women (100 to complete the study for each ethnic group) for determinations of body composition. Changes in the measured body composition both within and across ethnic groups will be assessed. The study will also examine the relationship of increased maternal body fat to increased gestational weight gain and to the birthweight of the baby. This study will provide information on the body composition changes occurring during pregnancy in the United States.

Evaluation of the Impact of a Maternal and Child Health Handbook

Alan Guttmacher Institute
111 Fifth Avenue
New York, NY 10003
(212) 254-5656

MCHIP
MCJ-367039
10/01/90–03/31/95
Project Director(s):
Jacqueline Darroch Forrest

Congress has required the preparation and field-testing of a handbook targeted to high-risk women and all families with young children. This project addresses the tasks of field-testing and evaluating the handbook. The project objective is to evaluate the impact of the handbook among a group of pregnant women, most of whom are low income, on a range of measures: Their knowledge, attitudes, and practice concerning health-related behaviors during pregnancy and during the first 2 years of the infant's life; their interaction with health care providers; their health outcomes; and the health outcomes for the newborn and infant. The project goals are: Detection of statistically significant effects; identification of any consistent patterns of effects, even though they may not be significant; and understanding of the role of the handbook within the complex set of factors that operate when pregnant women seek health care for themselves and their children.

Maternal Health

Risk Reduction in Pregnancy

Case Management of Substance Abusing Pregnant and Postpartum Women and Infants
Pascua Yaqui Tribe
7474 South Camino De Oeste
Tucson, AZ 85746
(602) 883-2838, ext. 28

OSAP/MCHB
SP-02287
07/01/90-06/30/95
Project Director(s):
Jorge Luis Garcia, M.S.W.

The Pascua Yaqui Indian Tribe will implement a case management project whose goal is to make available and accessible a coordinated effort of prevention, early intervention, and treatment services to Indian women who have a dysfunctional and destructive use of alcohol and/or drugs prior to, during, or after pregnancy.

***Las Madres* (Mothers Alcohol Drug Recovery and Education Services)**
Amity/Matrix Community Services
1030 North Fourth Avenue
P.O. Box 60520
Tucson, AZ 85751-6520
(602) 628-1221

OSAP/MCHB
SP-01530
07/01/90-06/30/95
Project Director(s):
Harry Kressler
Leticia D'Amore

The purpose of the *Las Madres* project is to provide substance-abusing pregnant and postpartum women, especially women from low socioeconomic, minority neighborhoods, with comprehensive outpatient drug treatment. Comprehensive services will be offered at one site to improve access while infants and preschool-age children of enrolled women receive therapeutic day care services through the children's center. Transportation will be available for the clients to facilitate prenatal and postnatal care as well as comprehensive case management services.

Long-Term Comprehensive Services to Mothers and Infants
Arizona Health Sciences Center
Department of Pediatrics
University of Arizona
1501 North Campbell Avenue
Tucson, AZ 85724
(602) 626-6303

OSAP/MCHB
SP-01638
07/01/90-06/30/95
Project Director(s):
Catherine J. Locke, Ph.D.

The purpose of this program is to effectively address the multiple needs of substance-using pregnant and postpartum women and their infants by pooling the resources of three community organizations. Case management services will assist women in meeting needs for prenatal care, transportation, child care, financial aid, and other essential services, while intensive outpatient therapy will focus on reducing drug use and improving coping skills. An infant center/therapeutic nursery will provide ongoing evaluation, monitoring, and individual care plans for drug-exposed infants. Community education and professional training programs will help mobilize the wider community for active participation in solving this problem.

Born Free: Perinatal Substance Abuse Intervention and Recovery Model
Contra Costa County Health Services Department
111 Allen Street
Martinez, CA 94553
(415) 646-1165

OSAP/MCHB
SP-01151
09/01/89–08/31/94
Project Director(s):
Hope Ewing, M.D.

The Contra Costa County Health Services Department will conduct a program of substance abuse services for low-income pregnant and postpartum women. This program will coordinate and augment county services in order to identify and educate substance-abusing women in prenatal clinics and at labor and delivery, and to induce them to enter, participate in, and remain in appropriate and accessible recovery services.

Casa Rosa: Residential Treatment for Women and Children
Isla Vista Health Projects
970 Embarcadero del Mar
Isla Vista, CA 93117
(805) 968-3044

OSAP/MCHB
SP-02950
09/01/90–08/31/95
Project Director(s):
Nancy Lee
Jack Crane

The purpose of Casa Rosa is to establish a residential treatment facility which will provide pregnant and postpartum women with an opportunity to achieve sobriety while remaining with their infants. Women will receive interventions to decrease drug and alcohol use as well as to enhance parenting skills. Infants will be monitored developmentally and provided with early intervention services. At the end of their residential treatment, the women will be helped to transition back into the community.

Case Management for Low Income Cocaine Using Women
Tarzana Treatment Center
18646 Oxnard Street
Tarzana, CA 91356
(818) 996-1051

OSAP/MCHB
SP-02520
09/01/90–08/31/95
Project Director(s):
Kenneth M. Bachrach, Ph.D.

The Case Management for Low Income, Cocaine Using Women project aims to develop and provide comprehensive, collaborative, and case-managed residential drugfree and intensive outpatient services to low-income, cocaine-using pregnant and postpartum women and their infants. The facility and program are located in the region of Los Angeles County ranking first in the number of babies born to drug-addicted mothers. Through the development of more coordinated and intensive treatment services to this population, it is hoped that among the program participants there will be reduced drug use, increased parenting knowledge, improved parenting behavior, increased self-sufficiency, and reduced criminal behavior.

Center of CARE
Children's Hospital Medical Center
of Northern California
Center for the Vulnerable Child
747 52nd Street
Oakland, CA 94609
(415) 652-3405

OSAP/MCHB
SP-01171
09/01/90–08/31/93
Project Director(s):
Neal Halfon, M.D., M.P.H.
Linnea Klee, Ph.D.

The purpose of the Center of CARE is to provide comprehensive, case-managed services to pregnant and postpartum chemically dependent women and their drug-affected infants. Services include medical, mental health, and developmental assessments of children; perinatal and pediatric care and referrals; community outreach and training; individual and group counseling; home visits; parenting and infant development education; outpatient drug and alcohol treatment and recovery services and referrals; and emergency supplies, transportation, and child care.

Comadres Project
East Los Angeles Alcoholism Council
916 South Atlantic Boulevard
Los Angeles, CA 90022
(213) 264-2211 or 268-9344

OSAP/MCHB
SP-02258
07/01/90–06/30/95
Project Director(s):
Ester Cadavid-Hannon, Ph.D.
Carlos Garcia

The Comadres Project is a 5-year program for pregnant and parenting Hispanic adolescents living in a public housing project in east Los Angeles which focuses on substance abuse prevention. The program uses mentors ("comadres") from the community and trains them to provide effective referrals and social support to the adolescents. An 8-week early intervention and prevention curriculum will be implemented for adolescents. The program also focuses on increased services for this population through a task force coalition and referral system development.

Community Clinic Prevention, Early Intervention and Treatment Project for Pregnant and Postpartum Women
San Francisco Community Clinic Consortium
1748 Market Street
Suite 205
San Francisco, CA 94102
(415) 252-7291

OSAP/MCHB
SP-01923
07/01/90–07/31/95
Project Director(s):
Carroll Johnson
Teresa M. Ramirez, M.P.H.

The San Francisco Community Clinic Consortium seeks to demonstrate the effectiveness of a comprehensive substance abuse prevention, intervention, and treatment program based in six community clinics and targeted to low-income and minority women who are contracepting, pregnant, or postpartum patients of the clinics. The project features multidisciplinary case-managed care for women who are substance abusers during pregnancy and the postpartum period. The expectation is that women involved in the project will exhibit lower levels of substance use and higher levels of abstinence during pregnancy, resulting in improved birth outcomes.

Continuum of Care for Chemically Dependent Women and Infants
San Mateo County Department of Health Services
225 West 37th Avenue
San Mateo, CA 94403
(415) 573-2329

OSAP/MCHB
SP-01500
07/01/90–06/30/94
Project Director(s):
Brad Gilbert, M.D., M.P.H.
Sheryl Parker, R.N., M.P.H.

A five-member interagency perinatal substance abuse team consisting of a public health nurse, a chemical dependency counselor, a psychiatric social worker, a probation officer, and a Children's Protective Services worker will provide case management and direct services to 150 chemically dependent women of childbearing age. The project goal is to prevent prenatal drug exposure among infants born to these women. Because of the variety of approaches represented by these team members, the family plans will be very comprehensive regarding ways to meet the complex social, psychological, and medical needs of these families.

Family Support Program for Drug-Exposed Infants/Mothers
Contra Costa County Department of Social Services
P.O. Box 5488
Concord, CA 94524
(415) 374-3732

OSAP/MCHB
SP-02954
09/01/90–08/31/95
Project Director(s):
William R. Weidinger, L.C.S.W.
Carol Lee, Ph.D.

This project proposes to create a comprehensive intervention and treatment program for drug- and alcohol-exposed infants and their families. The overall goals are to: (1) Reduce the severity of impairment among children born to substance-abusing pregnant women; (2) develop an integrated, coordinated system of care for referred impaired children; and (3) increase the availability and accessibility of intervention and treatment services for this high-risk population. Eight agencies are involved in this project, and a multidisciplinary team is responsible for coordinating services at both the client and system levels. Parents are court ordered into the program and permitted to retain custody of their child as long as they participate in the program. The family-centered aspect of the program offers services to siblings, fathers, relative caretakers, and infants placed in foster care.

Healthy Start Program
Highland General Hospital
1411 East 31st Street
Oakland, CA 94602
(415) 437-4688

OSAP/MCHB
SP-02265
07/01/90–06/30/95
Project Director(s):
Sandra Holliday, L.C.S.W.

The Healthy Start Program is a project designed to develop a system of early identification and comprehensive support and recovery services targeted to pregnant/parenting substance abusers and drug-exposed infants. The Healthy Start Program components include: Early identification and intervention; intake, assessment, and crisis intervention services; case management; individual and family counseling; parent education; prenatal, pediatric, and postpartum care; nonresidential and residential recovery services; child care and voluntary foster care; and support services, including developmental services, transportation, family planning, housing assistance, and employment skills development.

Model Project: Pregnant and Postpartum Women and Offspring
Women's Alcoholism Center
3130 20th Street, Suite 308
San Francisco, CA 94110
(415) 285-4484

OSAP/MCHB
SP-02431
07/15/90–06/30/95
Project Director(s):
Vacant

The Women's Alcoholism Center will develop a residence for pregnant crack addicts and their infants to help them break their addiction, rebuild themselves physically and emotionally, and learn to become the best parents they can be. The program is designed to intervene early in women's pregnancies in order to reduce fetal drug exposure and to allow women time to absorb information on recovery and parenting. Women will be encouraged to stay with their infants months after delivery in order to establish good bonding skills and to make a smooth transition into their communities.

Moms and Kids Recovery Center
Ventura County Department of Alcohol/Drug Programs
801 Poinsettia Place
Ventura, CA 93003
(805) 648-9517

OSAP/MCHB
SP-01904
07/01/90–08/31/95
Project Director(s):
Catherine Lee Puccetti

The Moms and Kids Recovery Center (M&KRC) addresses perinatal substance abuse in Ventura County by working with pregnant and postpartum women who are involved with alcohol and other drugs, and the women's infants and children through 5 years. In Ventura, approximately 16 percent of all infants born in 1989 were exposed to alcohol and other drugs. The M&KRC will provide a weekday treatment program featuring onsite counseling, child care and transportation services, basic perinatal health for mother and child, and a sober-living residence for women and their children.

Multi-FACET: Comprehensive Perinatal Services
Bay Area Addiction Research and Treatment/FACET
42 Franklin Street, 2N
San Francisco, CA 94102
(415) 552-7914

OSAP/MCHB
SP-01671
07/01/90–06/30/95
Project Director(s):
Ron Kletter, Ph.D.

Multi-FACET's goal is increased psychosocial stability, reduced drug use, and improved utilization of health services for pregnant and postpartum substance-abusing women, which, in turn, would be expected to result in improved birth outcomes and long-term benefits to their children's development and achievement. Multi-FACET will provide comprehensive outpatient substance abuse treatment and medical services to this target population of women, their children, and their significant others. Medical and psychological services will include perinatal care, substance abuse treatment, primary medical care, acupuncture, nutrition counseling, psychotherapy, and counseling for depression, anxiety, low self-esteem, and development of parenting and family planning skills.

Northern California Drug-Free Perinatal Project
Far Northern Regional Center
P.O. Box 492418
Redding, CA 96049-2418
(916) 222-4791

OSAP/MCHB
SP-02957
09/01/90–08/31/95
Project Director(s):
Susan Ferrell, M.P.A.

Northern California Drug-Free Perinatal Project is a four-county project in rural northern California designed to address the complex needs of pregnant and postpartum substance-abusing women. The project utilizes regional administration and residential treatment coupled with community-based case management services and interagency case conferencing. Further, the project will provide physician training to increase identification and referral of the target population, and will develop drug-free housing options in two target communities. The project will provide services to 500 women and their infants during the 5-year grant period.

OSAP Demonstration Grant for Pregnant and Postpartum Substance-Abusing Women and Infants
California State University at Los Angeles
University Auxiliary Services, Inc.
Division of Special Education
5151 State University Drive
Los Angeles, CA 90032
(213) 343-4433

OSAP/MCHB
SP-01493
02/01/90–01/31/94
Project Director(s):
Aja Tulleners Lesh, R.N., Ph.D.

The Family Recovery Program is a community-based program for 30 substance-abusing women and their infants in Eastern Los Angeles County. It utilizes the collaborative efforts of the California State University at Los Angeles Newborn Followup Project and OPTIONS—The Family Center, incorporating components of their individual programs into a holistic family approach to facilitate recovery. Services include frequent contacts with the mothers in the home, in individual therapy, and in support groups. Coordination and communication with community service providers, including social services, drug treatment centers, and medical care providers, is being fostered through an interagency coordinating council for drug-addicted women and through joint case management. The evaluation of the program will incorporate participant and program outcomes and will be compared with information in an already established data base of high-risk infants and families in 2-year followup.

Patterns
Monterey County Health Department
1270 Natividad Road
Salinas, CA 93906
(408) 755-4514

OSAP/MCHB
SP-01947
07/01/90–06/30/95
Project Director(s):
Jody Parsons

The purpose of the Patterns program is to provide chemically dependent pregnant and postpartum women with comprehensive outpatient drug treatment services and case management. Using the resources of existing community agencies, comprehensive services will be organized and integrated to improve access. The infants and preschool children of enrolled women will receive needed social services, and child care will be provided.

Phoenix Project
San Francisco Catholic Charities
Family and Children Services
1049 Market Street, Suite 200
San Francisco, CA 94103
(415) 864-7400

OSAP/MCHB
SP-02327
07/01/90-06/30/95
Project Director(s):
Gwendolyn Johnson, B.S.

The San Francisco Phoenix Project is a model residential treatment program which will provide comprehensive medical and therapeutic services for pregnant crack-addicted women and their children. The primary goals of the project are to (1) improve the likelihood of healthy birth outcomes among low-income, pregnant, chemically dependent women in San Francisco, (2) decrease the women's dependence on drugs and alcohol, and (3) improve their ability to successfully parent their newborns and their other children.

Physiologic Risk Assessments to Predict Preterm Birth
California Pacific Medical Center
Suite 300
2100 Webster Street
San Francisco, CA 94115
(415) 923-3046

Research
MCJ-060580
10/01/88-09/30/91
Project Director(s):
Denise Main, M.D.

This study seeks to validate a highly predictive (retrospective) screening method using uterine contraction monitoring recently developed by the principal investigator, and determine whether the ability to use this method to identify women at risk for preterm labor can be further improved by the addition of pelvic examination findings. The current 3-year project addresses whether these physiologic measures (i.e., uterine contraction frequency, cervical examination, and vaginal pH), when determined at standard prenatal visit intervals, can be used effectively to identify women who subsequently experience preterm birth because of preterm labor or preterm premature rupture of the membranes (PPROM) and whether interpretation of uterine contraction data can be improved and standardized by means of a computer program.

Pregnant and Parenting Addicts Recovery Program
Haight Ashbury Free Clinic
Drug Detoxification Project
529 Clayton Street
San Francisco, CA 94117
(415) 565-1905

OSAP/MCHB
SP-02387
07/01/90-08/30/95
Project Director(s):
Daryl Inaba, Ph.D.

The Pregnant and Parenting Addicts Recovery Program is established to provide drug treatment services and coordinated access to comprehensive community services for pregnant/parenting female substance abusers. Services include prenatal, postnatal and infant medical care; parenting skills classes; vocational guidance; and varied social services. Onsite child care will be provided for detox and recovery services.

Prevention of Substance Abuse Project
Logan Heights Family Health Center
1809 National Avenue
San Diego, CA 92113
(619) 234-0360 or 234-8171

OSAP/MCHB
SP-01621
09/01/89–08/31/94
Project Director(s):
Robyn Prime

The Prevention of Substance Abuse Project is a prevention and treatment program designed to reduce the incidence of alcohol and substance use among prepregnant, pregnant, and postpartum women. The program is targeted toward medically underserved, low-income, predominantly Hispanic women who are users of services provided by the Logan Heights Family Health Center, are residents of its service areas, or enter the program by virtue of programmatic referral linkages. Service components include interagency and interdepartmental promotion of the availability of services; identification of women at risk at all points of access to the health center; a treatment component which stresses culturally sensitive and bilingual support services; group, family, and individual counseling; parenting classes; well-baby care; and an array of community referral linkages.

Project New Beginnings: A Model Perinatal Substance Abuse/Child Welfare Program
Children's Institute International
711 South New Hampshire Drive
Los Angeles, CA 90005
(213) 385-5100

OSAP/MCHB
SP-02291
07/01/90–06/30/94
Project Director(s):
Steve Ambrose, Ph.D.
Mary Emmons

The purpose of the New Beginnings Project at Children's Institute International is to prevent and/or mitigate the adverse effects on both mother and child of perinatal substance abuse through provision of comprehensive drug treatment, parent education, and child development services. These services will be integrated into a community-based multiservice child abuse and neglect treatment and prevention agency. The goals of the project are to improve birth and developmental outcomes for children, reduce parental substance use, increase parenting competency, prevent child abuse and neglect, and maintain children in the care of their parents.

Ravenswood Parent/Child Intervention Program
Ravenswood City School District
2160 Euclid Avenue
East Palo Alto, CA 94303
(415) 329-6761

OSAP/MCHB
SP-02129
07/01/90–06/30/95
Project Director(s):
Harriet Morgan

This project has two main goals: (1) To reduce the severity of impairment among children born to substance-abusing women through a therapeutic day care program for the children, coupled with a coordinated parenting program for the mothers; and (2) to extend the impact of the direct services to the children through a comprehensive program of counseling, parenting, and medical care for the mothers. It brings the efforts of three public agencies together in a community setting to provide therapeutic day care to children, supplemented by parenting skills training, medical treatment, and drug counseling services for parents.

Santa Clara County Perinatal Substance Abuse Program
Santa Clara County Health Department
595 Millich Drive
Suite 100
Campbell, CA 95008
(408) 299-8558 or 299-7003

OSAP/MCHB
SP-01498
02/01/90–01/31/95
Project Director(s):
Anthony J. Puentes, M.D.

The Perinatal Substance Abuse Program provides comprehensive substance abuse treatment as well as a wide range of supportive and multidisciplinary services to pregnant substance abusers. An early identification and intervention model has been developed for community prenatal clinics as well as the development of a communitywide system of outreach, education, and training. A specialized adolescent treatment program has been developed. A one-stop complete multiservice perinatal substance abuse center, to include prenatal and pediatric care, will be developed.

Sisters Helping Individuals Toward Empowerment, Love, Development, and Strength for Families Projects
Charles R. Drew University
of Medicine and Science
1621 East 120th Street
Los Angeles, CA 90059
(213) 603-4657 or 603-8292

OSAP/MCHB
SP-01509
07/01/90–06/30/93
Project Director(s):
Xylina D. Bean, M.D.
Kathleen M. West, M.P.H.

The mission of the SHIELDS for Families Projects is to support the maintenance and functioning of drug-affected families and to strengthen them by working with drug/alcohol-abusing mothers and their children in both center- and home-based settings. Because clients present in various states of readiness for program participation, SHIELDS provides varying levels of program intensity and focus depending on the client's special needs. All programs provide child care, access to pediatric and women's health services, life skills building, and recovery education.

Special Perinatal and Rehabilitation Clinic: A Project for Pregnant and Postpartum Women and Infants
Public Health Foundation of Los Angeles County
13200 Crossroads Parkway North, Suite 135
City of Industry, CA 91746
(213) 893-0161

OSAP/MCHB
SP-01455
02/01/90–03/31/91
Project Director(s):
Delores G. Alleyne, M.D., M.P.H., M.B.A.

The purpose of the Special Perinatal and Rehabilitation Clinic (SPARC) project is to improve access to comprehensive perinatal services, drug treatment, and a full range of social services for black substance-abusing pregnant women to improve pregnancy outcomes, promote the continuity of families and family reunification, and prevent unnecessary rehospitalization and future developmental problems in infants/children of substance-abusing mothers. Activities used to attain these goals occur in collaboration with various community health and substance abuse agencies within the target area providing services for substance-abusing pregnant women.

Support, Outreach, and Services for Women at Risk, or Save Our Sisters
San Francisco Department of Public Health
1380 Howard Street, Fourth Floor
San Francisco, CA 94103
(415) 255-3500

OSAP/MCHB
SP-01172
02/01/90–01/31/95
Project Director(s):
Wayne Clark, Ph.D.

This project will increase availability of and access to drug prevention, intervention, and treatment services and perinatal support services for substance-using pregnant and postpartum women. The project is especially designed to intervene with crack-addicted, low-income women, many of whom are minorities. The project's goals are to: (1) Decrease the incidence and prevalence of drug and alcohol use among pregnant and postpartum women to reduce their risk of poor perinatal outcomes for current and subsequent pregnancies; (2) institutionalize interagency cooperation and coordination to address the needs of project clients and their infants; and (3) strengthen family and community support systems for substance-using pregnant and postpartum women and their infants.

Women and Infants Needing Drug-Free Opportunities Project
Mendocino County Department of Public Health
Division of Alcohol/Drug Programs
302 West Henry Street
Ukiah, CA 95482
(707) 463-5672

OSAP/MCHB
SP-02414
07/01/90–06/30/95
Project Director(s):
Ned Walsh

The Women and Infants Needing Drug-Free Opportunities (WINDO) Project is a comprehensive, multidisciplinary, community-based, collaborative effort to prevent and intervene in the use and abuse of alcohol and other drugs by pregnant and parenting women. The project targets low-income women and their infants residing in Lake and Mendocino Counties, and includes strategies for addressing the specific needs of the Native American and adolescent populations in the two-county area. The project's aims are to reduce substance abuse and improve birth outcomes, and to reduce the incidence of impairment among infants born to the target groups.

Case Management for Pregnant and Postpartum Drug Abusers
Connecticut Department of Health Services
Bureau of Community Health
150 Washington Street
Hartford, CT 06106
(203) 566-3708

OSAP/MCHB
SP-01181
02/01/90–01/31/95
Project Director(s):
Ardell Wilson, D.D.S., M.P.H.

The purpose of this project is to implement and evaluate a case management model consisting of a comprehensive network of service organizations to address the multiple health and social needs of substance-using pregnant/postpartum women and their infants. The project goals are to: (1) Promote the involvement and coordinated participation of multiple organizations in the delivery of comprehensive services for substance-using pregnant/postpartum women and their infants; (2) increase the availability and accessibility of prevention, early intervention, and treatment services for substance-using pregnant/postpartum women and their infants; and (3) improve the pregnancy outcomes of women who use alcohol and other drugs.

Women's Drop-In Center
Hill Health Center
400 Columbus Avenue
New Haven, CT 06519
(203) 776-9594

OSAP/MCHB
SP-01590
02/01/90-01/31/95
Project Director(s):
Cornell Scott
Randi S. Rubin, M.A.

The Women's Drop-In Center is available to all pregnant and postpartum substance-using women and their children in the greater New Haven area. Through a wide variety of services, most available on a drop-in basis and all bilingual, women can begin to develop support systems, new resources, and understanding of their addictions and the skills necessary to gain sobriety. Health care services (OB/GYN, pediatric, adult medicine, and dental) and community referral and advocacy are also provided to each woman on an "as needed" basis. Activities at the Women's Drop-In Center include bilingual fellowship in-house groups; women's therapy groups; drug/alcohol education; nutrition counseling; daily lunches; a children's early developmental program; parenting skills workshops; medical aspects of pregnancy, labor, and delivery; and creative expression groups.

Delaware Diamond Deliveries
Delaware Department of Health and Social Services
Division of Public Health
P.O. Box 637
150 Washington Street
Dover, DE 19903
(302) 798-4212

OSAP/MCHB
SP-01160
02/01/90-01/01/95
Project Director(s):
Kay D. Makar, R.D., M.P.H.

Delaware Diamond Deliveries is a family-centered prenatal care program designed to reduce the incidence and prevalence of drug and alcohol use by substance-abusing pregnant women. The project emphasizes substance abuse counseling, but also includes other services and support systems judged necessary to achieve personal stability and a drug-free future.

Better Babies Project
Better Babies Project, Inc.
1717 Massachusetts Avenue, N.W.
Suite 403
Washington, DC 20036
(202) 387-0900

Research
MCJ-110558
10/01/87-09/30/91
Project Director(s):
Deborah L. Coates, Ph.D.

The major research objective of this study is to determine whether a multirisk factor intervention based on a comprehensive service/social support model can reduce the incidence of low birthweight by 20 percent in a predominantly black Washington, DC, neighborhood by the end of a 3 1/2-year period. A second research objective is to test the effectiveness of a self-help guide, designed for and tested on pregnant women, in reducing the incidence of smoking behavior for this population of pregnant women.

Early Identification/Treatment/Rehabilitation of Cocaine-Using Women and Children
District of Columbia Institute for Mental Health
3000 Connecticut Avenue, N.W.
Suites 106–108
Washington, DC 20008
(202) 462-2992

OSAP/MCHB
SP-02351
07/01/90–06/30/93
Project Director(s):
Johanna Ferman, M.D.
Mary Ann Walker, M.P.H.

The Center for Family Health uses a family-centered approach to provide drug-exposed infants, families, and communities with the range of services necessary to overcoming the environmental and health factors attributed to drug exposure. The center uses case management techniques to integrate health, mental health, and substance abuse treatments while providing extensive social service family supports and community referrals.

Pregnant and Postpartum Women and Their Infants
District of Columbia Department of Human Services
Commission of Public Health
1660 L Street, N.W., Suite 1117
Washington, DC 20036
(202) 727-4076

OSAP/MCHB
SP-01591
02/01/90–01/31/95
Project Director(s):
John Bland, M.S.W.

The racial and socioeconomic composition in the District of Columbia makes it a high-risk population group for drug abuse and high infant mortality. Most vulnerable are women of childbearing age and their infants. They are usually heads of households, reside in public housing, and, above all, represent poor blacks. With substance abuse comes risky behaviors. The most significant aspect of the program is to identify high-risk pregnant and postpartum women and their infants who reside in the target areas, recruit them and place them in treatment, and provide social support aimed at retention and eventful drug-free and productive lives.

Comprehensive Child Abandonment Intervention Project
Operation Parental Awareness and Responsibility
10901-C Roosevelt Boulevard, Suite 1000
St. Petersburg, FL 33716
(813) 570-5080

OSAP/MCHB
SP-01758
02/01/90–01/31/94
Project Director(s):
Shirley D. Coletti

The purpose of the Maternal Substance Abuse Intervention Team is to provide substance-abusing pregnant and postpartum women with services which will assist them in accessing substance abuse treatment services. These women present a host of needs which must be addressed in order to access and continue with substance abuse treatment services. An interdisciplinary team approach is utilized to meet these needs. A steering committee addresses any identified systems level gaps and barriers to treatment services. A brochure, resource directory, substance abuse training curriculum, and policy and procedure manual have been developed.

Interconceptional Support of Women at High Risk for Low Birthweight
North Central Florida Maternal and Infant Care Project
730 North Waldo Road
Building A
Suite B
Gainesville, FL 32601
(904) 392-4491

MCHIP
MCJ-126007
10/01/87–09/30/91
Project Director(s):
Diane Dimperio, M.A., R.D.

The goal of this project is to reduce the incidence of low birthweight by improving the preconceptional health of women who are at high risk for delivering a low birthweight infant. High-risk women are identified at delivery and are followed for 2 years. Client services are then provided by community health workers, who make home visits and develop a risk reduction plan for each client. Intervention protocols are developed for each risk factor and involve referral to the appropriate resource, followup to ensure client compliance, and reinforcement of professional counseling or supplemental teaching.

Interdisciplinary Training in Maternal Nutrition
University of Florida
Department of Obstetrics and Gynecology
North Central Florida Maternal and Infant Care Project
730 North Waldo Road, Building A, Suite B
Gainesville, FL 32601
(904) 392-3027

Training
MCJ-009119
07/01/88–06/30/93
Project Director(s):
Charles S. Mahan, M.D.

This training grant provides funding for a comprehensive course in maternal nutrition which is offered twice a year to a professional multidisciplinary audience. Through lectures, workshops, and informal exchanges, health care providers learn the science and application principles of assessment and management of maternal nutrition.

Model Projects for Pregnant and Postpartum Women and Their Infants
Florida Department of Health and Rehabilitative Services/Hillsborough County Public Health Unit
1105 East Kennedy Boulevard
13301 Bruce B. Downs Boulevard
Tampa, FL 33605
(813) 974-4860

OSAP/MCHB
SP-01559
09/01/89–08/31/94
Project Director(s):
Philip Marty, Ph.D.

Project SUPPORT is a collaborative effort involving three agencies (Florida Department of Health and Rehabilitative Services/Hillsborough County Public Health Unit, Alcohol Community Treatment Services, and the University of South Florida's College of Public Health) in Hillsborough County, Florida. The program provides outreach and intervention to pregnant women who use/abuse alcohol and other substances. The target population is low-income and minority women from high-risk, low socioeconomic areas in the county. Intervention is provided by indigenous community health aides who assist clients through community outreach and social support. The program will assist clients with gaining access to services such as day care, transportation, and other necessary resources. Community health aides provide followup to clients who miss appointments and render assistance to assure the clients' early and continuous participation in prenatal care and substance abuse treatment services.

Perinatal Substance Abuse: Case Management
University of Miami School of Medicine
Department of Obstetrics-Gynecology (R-136)
P.O. Box 016960
Miami, FL 33101
(305) 549-6950 or 549-7406

OSAP/MCHB
SP-01951
07/01/90–08/30/94
Project Director(s):
Gene Burkett, M.D.

The goal of this project is to develop a model of care for substance-abusing pregnant and postpartum women and their infants which can be replicated throughout our community at other primary care clinics. The project objectives are to: (1) Encourage the women to receive prenatal care and drug treatment (2) use case management services which aggressively seek out the patient in her environs; (3) provide prenatal, postpartum, and gynecological services to 50 women annually and provide pediatric, neurodevelopmental assessment and followup care to their infants over a 3-year period; (4) provide educational, vocational assessment/skills, and other community services to women and their mates; (5) offer prenatal care and rehabilitation as early in pregnancy as possible to decrease risks; and (6) provide alternative supports to enhance prepregnancy rehabilitation.

Pregnant and Postpartum Women and Their Infants
State of Florida Department of Health and
Rehabilitative Services
c/o Women's Intervention Services and Education
601 North Baylen Street
Pensacola, FL 32501
(904) 444-8465

OSAP/MCHB
SP-01138
02/01/90–01/31/95
Project Director(s):
J. Paul Rollings, Ph.D.
Diane Kratochvil, M.S.W.

The goals of this project are to (1) promote the involvement and coordinated participation of multiple organizations in the delivery of comprehensive services for substance-using pregnant and postpartum women and their infants; (2) increase the availability and accessibility of prevention, early intervention, and treatment services for these populations; (3) improve the birth outcomes of women who use alcohol and other drugs during pregnancy, and decrease the incidence of infants affected by maternal substance use; and (4) reduce the severity of impairment among children born to substance-using women.

Prenatal and Interconceptional Support of Substance-Abusing Mothers
University of Florida
Department of OB-GYN
NCF-MIC Project
15 Southeast First Avenue
Gainesville, FL 32601
(904) 392-4491

OSAP/MCHB
SP-02124
07/01/90–06/30/95
Project Director(s):
Diane Dimperio, M.A., R.D.

This project seeks to reduce substance abuse and improve birth outcomes by providing coordinated, interdisciplinary care to low-income, substance-abusing women in Putnam County using existing facilities. Prenatal and postpartum care are provided along with individual and group therapy. Case management is provided by paraprofessionals during home visits.

Prevention of Substance Abuse by Pregnant and Postpartum Women
Shands Hospital
Department of Social Work Services
Box J-306
Gainesville, FL 32610
(904) 395-0224

OSAP/MCHB
SP-01679
09/01/89–08/31/94
Project Director(s):
Diane P. Mauldin, L.C.S.W.

This project addresses the increasing problem of substance abuse among pregnant and postpartum women by providing case management services prenatally and for 2 years postpartun Interventions focus on both prevention and treatment for the women and their children. Services include clinical intervention, community referrals, substance abuse education, and concrete financial assistance as necessary.

Project K-MOD (Keeping Mothers Off Drugs)
Apalachee Center for Human Services, Inc.
625 East Tennessee Street
P.O. Box 1782
Tallahassee, FL 32302
(904) 487-2930

OSAP/MCHB
SP-01179
09/01/89–09/30/91
Project Director(s):
Frank Beeman, M.A.

Project K-MOD (Keeping Mothers Off Drugs) is located within the Chemical Dependency Unit of Apalachee Center for Human Services. The project will link together county health units; economic aid services; and Children, Youth, and Families services, and will expand substance abuse treatment availability. In addition, the project will provide transportation and child care supervision as needed for those mothers within the target population. The project will develop a continuum of services for pregnant/postpartum low-income minority mothers ages 18–44 in Gadsden, Leon, Wakulla, and Jefferson Counties who are abusing psychoactive chemicals. The evaluation plan will consist of three parts: A system process evaluation, a client process evaluation, and a project outcome evaluation.

Women's Services
Center for Drug-Free Living
100 West Columbia Street
Orlando, FL 32806
(407) 297-2086

OSAP/MCHB
SP-01608
02/01/90–1/31/94
Project Director(s):
Nancy Rudner Lugo, M.S.N., M.P.H.

The Women's Services project seeks to address the multiple needs of substance-abusing women and reduce barriers they may be confronting while attempting to participate in treatment for addictions. The program provides service coordination, health education, parenting skills training, child care, and Children of Substance Abusers counseling in collaboration with ongoing outpatient and residential treatment for women of childbearing age. It is anticipated that these services will facilitate participation in addictions treatment, improve retention rates, and enhance family functioning, while assisting clients in accessing community resources.

Comprehensive Intervention for Recovering Addict Mothers
Georgia Mental Health Institute
1256 Briarcliff Road, N.E., Room 324 West
Atlanta, GA 30306
(404) 727-2503

OSAP/MCHB
SP-01198
09/01/89–08/31/91
Project Director(s):
Iris Smith, M.P.H.

The aim of this project is to reduce the incidence of developmental problems associated with prenatal drug exposure and maternal drug use postpartum by: (1) Increasing the number of women who are able to discontinue drug use during pregnancy through community outreach, education, and intervention; and (2) facilitating continued abstinence postpartum through case management; psychosocial support; training in interpersonal, coping, and job-seeking skills; parenting education; and instrumental support to women who are motivated to discontinue their use of drugs.

Minority Connection: Reduction of Minority Infant Mortality
CONTINUUM Alliance for Healthy Mothers
and Children
1252 West Peachtree Street, N.W.
Suite 311
Atlanta, GA 30309
(404) 873-1993

MCHIP
MCJ-136004
10/01/87–11/30/90
Project Director(s):
Mary Langley, R.N., M.P.H.

This project aims to reduce postneonatal mortality rates associated with inadequate parenting skills and poor utilization of prenatal and child health care services. Activities include establishment of a resource mothers program in which church women are trained to assist pregnant women in negotiating the health care and social services systems, and implementation of an adolescent peer counselor program. The project also establishes self-sustaining local coalitions to monitor and address problems that contribute to poor pregnancy outcomes.

Pineland Mental Health, Mental Retardation, and Substance Abuse Services
Bulloch County Board of Health
Pineland Mental Health, Mental Retardation
and Substance Abuse
21 North Zetterower Avenue
Statesboro, GA 30458
(912) 764-6971

OSAP/MCHB
SP-01189
09/01/89–08/31/93
Project Director(s):
Nancy S. Waters
Iris Graham

This project proposes to coordinate community and State services to maximize treatment and general health care for substance-abusing pregnant women and their infants. The project will focus on three major goals for intervening with substance-abusing pregnant women and their newborns in a 16-county area of Georgia. Project goals are to: (1) Provide appropriate training to staff of human services agencies dealing with pregnant women; (2) develop a model program of intervention for selected pregnant women who are identified as substance abusers with the result of improving the birth outcome and decreasing the effects of substance abuse on the infants; and (3) provide a 2-year followup of the women and infants served by this program to assess the impact of the program on the development of the child and on the lifestyle of the mother.

Targeting High-Risk Female Adolescents for Prevention of Substance Use: Before Pregnancy, During Pregnancy, and Postpartum
Emory University School of Medicine
Grady Memorial Hospital
Obstetrics and Gynecology Department
Box 26158
Atlanta, GA 30335
(404) 589-3543

OSAP/MCHB
SP-01957
06/15/90–06/15/95
Project Director(s):
Marion Howard, Ph.D.

The overall aim of this project is to demonstrate that it is possible for family planning clinics serving adolescents to identify and target those adolescents at highest risk for becoming sexually involved and pregnant at a young age as well as becoming substance users. To demonstrate this, the project will use an adolescent family planning clinic as a base to increase the availability and accessibility of prevention and early intervention services and to improve linkage with appropriate treatment services. Information about substance use and reproductive health will be integrated into eighth grade human sexuality education programs, a family planning clinic program, and a prenatal education program.

BabySAFE Hawaii
(Substance Abuse Free Environment)
Hawaii Department of Health
Family Health Services Division
741-A Sunset Avenue
Honolulu, HI 96816
(808) 946-4771

OSAP/MCHB
SP-02132
07/20/90–06/30/95
Project Director(s):
Loretta J. Fuddy, M.S.W., M.P.H.
Roni Sellmann, M.Ed., M.S.P.H.

BabySAFE is a multilayered, comprehensive approach to the problem of perinatal addiction, with a strong public-private partnership. Program components include the implementation of a statewide council to prepare a State plan concerning perinatal addiction, a public awareness multimedia campaign, professional education, and a community-based outreach and outpatient intervention program which combines case-managed prenatal care with substance abuse treatment services.

IPCA Perinatal Care Project for Substance Use Prevention
Idaho Primary Care Association
4948 Kootenai #203
Boise, ID 83705
(208) 345-2335

OSAP/MCHB
SP-01593
09/01/89–08/31/94
Project Director(s):
Dean A. Hungerford

This model seeks to improve the birth outcomes for women, especially low-income and minority women, by decreasing their substance use, increasing early entry into prenatal care, and providing case management services. The model links primary medical care resources (community and migrant health centers) with the State's substance abuse treatment facilities and other community support services. A case manager will be assigned to assure that each patient is assisted in obtaining the services needed.

Substance Abuse Prevention for Pregnant and Postpartum Women and Their Infants
Nez Perce Tribe
P.O. Box 365
Lapwai, ID 83540
(208) 843-2253

OSAP/MCHB
SP-02107
07/01/90–06/30/95
Project Director(s):
Cecilia Bourgeau, B.S.Ed.

This project seeks to identify high-risk children, women, and couples who are experiencing dysfunction related to substance abuse, and to develop a holistic approach to health service delivery for this target group which will empower individuals to assume responsibility for their bodies, behavior, and attitudes. The specific aim of this project is to educate and to provide a catalyst for behavioral changes that reflect a responsible and caring environment for pregnant women, unborn babies, and postpartum women and their infants. This will include the involvement and coordination of multiple tribal, State, and Federal programs and will increase outreach, preventive information, and active intervention with tribal families.

Drug-Free Families with a Future
Illinois Department of Public Health
Division of Family Health
535 West Jefferson
Springfield, IL 62761
(217) 782-2736

OSAP/MCHB
SP-01225
02/01/90–01/31/95
Project Director(s):
Stephen Saunders, M.D., M.P.H.
Gayle Rabins, B.A.

This project provides for comprehensive substance abuse, medical, social, and environmental support services. Substance abuse services include early intervention, prevention, treatment, and aftercare. By means of an intensive interagency effort, this program integrates services for substance-abusing women of childbearing age and their infants and increases the availability and accessibility of services.

Lake County Health Department Services for Substance-Abusing Pregnant/Postpartum Women and Their Infants
Lake County Health Department
3010 Grand Avenue
Waukegan, IL 60085
(708) 360-6716

OSAP/MCHB
SP-02812
10/01/90–08/31/95
Project Director(s):
Susan Bekenstein, M.S.W.

This project will offer a multidisciplinary case management team, consisting of a substance abuse counselor and community health nurse, to meet the medical, social, and psychological needs of substance-abusing pregnant and postpartum women and their children on an outpatient basis. "One-stop shopping" for pregnant and postpartum women will be available, including prenatal care; substance abuse counseling; Special Supplemental Food Program for Women, Infants and Children (WIC) assistance; family planning services; enrollment in Medicaid, if applicable; Healthy Babies clinic for neonates and older infants' and children's well-child health care services; care for acute illnesses; and HIV testing and counseling.

Project Hope
Columbus Hospital
Women's Chemical Dependence Program
2520 North Lakeview Avenue
Chicago, IL 60614
(312) 868-4673

OSAP/MCHB
SP-02239
07/01/90–06/30/95
Project Director(s):
Maureen R. Kelly, L.C.S.W.

The four primary goals of Project Hope are to: (1) Increase the availability and accessibility of prevention, early intervention, and treatment services for addicted pregnant women and their children; (2) decrease the incidence and prevalence of alcohol and drug abuse among pregnant and postpartum women; (3) improve birth outcomes of women who use alcohol and other drugs during pregnancy, and decrease the incidence of infants affected by maternal substance abuse; and (4) reduce the severity of impairment among children born to substance-abusing women.

Spouse Abuse and Pregnancy Outcomes: A Prediction Study
University of Louisville Research Foundation
Department of Family Practice
Ambulatory Care Building
Louisville, KY 40292
(502) 588-5201

Research
MCJ-210600
10/01/90–09/30/93
Project Director(s):
Gabriel Smilkstein, M.D.
Cheryl Aspy, Ph.D.

The aim of this 3-year prospective study is to assess the impact of spouse abuse, biomedical risk, and psychosocial stresses and resources upon pregnancy outcomes. In this study, a global screening instrument will be used to identify spouse/partner abuse in gravid women who are utilizing the services of the university prenatal clinic. Approximately 4,400 women will be screened, and a sample of 400 abused gravidas will be matched with an equal number in a control group for age, race, marital status, parity, and gravidity.

Collaborative Approach to Nurturing
Children's Hospital of New Orleans
200 Henry Clay Avenue
New Orleans, LA 70118
(504) 524-4611

OSAP/MCHB
SP-02269
07/01/90–06/30/95
Project Director(s):
Michael Kaiser, M.D.

Collaborative Approach to Nurturing (CAN) will work collaboratively with several community organizations to provide a community-based model to promote the prenatal and postnatal health and well-being of mothers and their babies; educate cocaine-using mothers as well as the greater community regarding the physical effect of cocaine on women and their infants; and provide a comprehensive approach for infants which will assess, diagnose, and appropriately intervene when developmental or physical abnormalities are identified due to prenatal cocaine exposure or postnatal parenting problems. Case management will be a central component of the project and will attempt to ensure clients' access to all necessary services, including medical, substance abuse/chemical dependency treatment, and social/support services. The evaluation plan will allow assessment of the success of the activities and dissemination to others regarding the unique aspects of this project.

Baltimore County Department of Health Model Project for Pregnant and Postpartum Women Substance Abusers and Their Infants
Baltimore County Department of Health
Public Health Nursing Services
1 Investment Place, 10th Floor
Towson, MD 21204
(301) 887-2708

OSAP/MCHB
SP-01478
02/01/90–01/31/95
Project Director(s):
Jane Galbraith, R.N., M.A.

The purpose of this project is to prevent and/or reduce drug use in pregnancy and to promote optimal child care practices through early identification, assessment, education, case management, and followup. The model represents a coordinated, comprehensive service delivery system for substance-abusing women and their infants before, during, and after pregnancy.

Baltimore Project and Substance Intervention Program
Baltimore City Health Department
303 East Fayette Street
Baltimore, MD 21202
(301) 396-9994

OSAP/MCHB
SP-01158
02/01/90–01/31/93
Project Director(s):
Thomas P. Coyle
Daisy Rae Morris, M.P.H.

This project is designed as an intensive outreach, case management, and treatment program exploring the interface of governmental, health, and community organizations for the purpose of reducing risk factors associated with infant mortality and morbidity within an inner-city community in Baltimore. The two major goals of this project are to (1) ensure the birth of healthy infants by decreasing the risk behaviors of high-risk pregnant women; and (2) increase the ability of the mother and family to provide effective nurturing for the infant. In carrying out these goals, the project will develop a special focus on potential or current substances being used by pregnant and postpartum women and their infants.

Smoking Cessation/Relapse Prevention in Low-Income Mothers
Johns Hopkins University
School of Hygiene and Public Health
Department of Health Policy and Management
624 North Broadway
Baltimore, MD 21205
(301) 955-3018

Research
MCJ-240562
11/01/87–10/31/91
Project Director(s):
Ruth R. Faden, Ph.D., M.P.H.

The overall objective of this study is to test the effectiveness of inexpensive, easily administered interventions designed to assist low-income pregnant women and new mothers who smoke to quit or to significantly reduce their smoking levels. The general research hypothesis of the study is that pregnant smokers who are exposed to multiple smoking cessation and relapse prevention interventions will exhibit greater levels of reduction and abstinence than those who are not exposed.

Center for Human Services
P.O. Box A-2097
850 Pleasant Street
New Bedford, MA 02741
(508) 999-2321

OSAP/MCHB
SP-02888
09/01/90–08/31/95
Project Director(s):
Brian Foss

The project's primary goals are to reduce substance abuse and addiction among women and, as a result, improve the birth outcomes and development of their infants. Special emphasis will be placed upon Hispanic, Portuguese, and Cape Verdean minority and bilingual households which comprise approximately 50 percent of New Bedford's population in ethnic neighborhoods. Another component of the program will focus on communitywide education and prevention through an extensive media campaign, school and community-based presentations (i.e., at churches, social clubs, and the like) to young people and adults. Included is a comprehensive training plan to educate and enlist the support of other human service, education, government, and health care providers.

Cocaine Use in Pregnancy: A Comprehensive Care Project
Baystate Medical Center
759 Chestnut Street
Springfield, MA 01199
(413) 784-5083

OSAP/MCHB
SP-01941
07/01/90–06/30/95
Project Director(s):
Edward Bailey, M.D.

The purpose of the Bay/Bright Project is to draw upon the strengths of two major sites in this geographical region to focus on and provide improved services to drug and alcohol using pregnant women, with special attention to the use of cocaine. Major goals include improved screening, access, and quality of medical care; active health promotion of mother and child; provision of a broad array of supportive and therapeutic services from the prenatal period through 36 months postpartum; and evaluation of impact using process and outcome assessment. A continuous case management model will provide improved coordination of services during prenatal and postpartum periods. Regular and systematic followup of children exposed to drugs during the prenatal period will be performed and used to document outcomes and improve clinical decision making regarding interventions and referrals to other agencies or services.

Improving Pregnancy Outcomes of Substance-Abusing Mothers
Massachusetts Health Research Institute
349 Broadway
Cambridge, MA 02139
(617) 661-3991

OSAP/MCHB
SP-01144
09/01/89–08/31/94
Project Director(s):
Norma Finkelstein, Ph.D.

The purpose of this program is to prevent adverse birth outcomes and birth defects in babies born to alcohol- and drug- addicted mothers, to intervene early in the pregnancy of addicted women and assist them in staying drug free, to prevent relapse during pregnancy and after delivery, to assist these women in acquiring appropriate parenting skills, and to increase access to treatment for pregnant addicted women throughout Massachusetts. The ultimate goal of the program is to develop a model for the delivery of services to pregnant and postpartum alcohol- and drug-addicted women and their children which can be replicated in other parts of the country.

Perinatal Substance Abuse
Health and Human Services of Providence Hospital
210 Elm Street
Elm Street Center
Holyoke, MA 01040
(413) 538-9400

OSAP/MCHB
SP-01615
02/01/90–09/30/94
Project Director(s):
Karen Engell, M.S.N., N.P.
Claudia Phillips, M.P.H.

The goal of this project is to improve the access of pregnant and parenting substance-abusing women to a comprehensive continuum of perinatal and substance abuse treatment services, and to improve their compliance with treatment. Increased participation will result in decreased substance use and improved outcomes for women and their infants. This will be achieved through professional education; enhanced health and treatment services, both inpatient and outpatient; and increased case management.

Preconceptional Vitamin Use and Neural Tube Defects
Boston University School of Medicine
Slone Epidemiology Unit
1371 Beacon Street
Brookline, MA 02146
(617) 734-6006

Research
MCJ-250567
03/01/88–02/28/92
Project Director(s):
Allen A. Mitchell, M.D.

This study seeks to establish the potential benefit of preconceptional vitamin supplementation in reducing the incidence of neural tube defects (NTDs), and examine some of the potential hazards of excessive preconceptional vitamin supplementation. Two primary hypotheses and one secondary hypothesis guide the study. The primary hypotheses are: (1) Multivitamin supplementation in the month immediately preceding the last menstrual period (LMP) is associated with a 50 percent reduction in NTDs; and (2) folate supplementation in the month immediately preceding the LMP is associated with a 50 percent reduction in NTDs. The secondary hypothesis posits that excessive supplementation with vitamins or minerals in the month either preceding or including conception or in the months following conception increases the risk of selected birth defects.

Project Catch the Hope
Dimock Community Health Center
55 Dimock Street
Roxbury, MA 02119
(617) 442-8800

OSAP/MCHB
SP-01687
07/01/90–06/30/93
Project Director(s):
Jackie Jenkins-Scott
Genita Ekpenyong, M.D., M.P.H.

Project Catch the Hope will provide comprehensive health services, substance abuse treatment, education, and child development/parenting services to polysubstance-abusing pregnant women incarcerated at one site. The resources of the three collaborating agencies and existing community agencies will be integrated to provide these services to women in their home communities and at a residential alternative sentencing program. This project will decrease recidivism by facilitating successful reintegration into the home community.

Study of Psychosocial Factors in Maternal Phenylketonuria
Boston Children's Hospital
Department of Psychiatry
300 Longwood Avenue
Gardener House, Room 817
Boston, MA 02115
(617) 735-7346

Research
MCJ-250529
11/01/85–10/31/91
Project Director(s):
Susan E. Waisbren, Ph.D.

Women with phenylketonuria (PKU) are at risk for bearing children with mental retardation and/or physical disabilities. Dietary treatment during pregnancy, if initiated prior to conception, offers protection to the fetus. Many women seek medical attention after they are pregnant, however. The investigators in this study posited that psychosocial factors determine when a young woman with PKU is likely to plan her pregnancy and comply with medical recommendations for treatment. A 3-year prospective longitudinal study is currently under way to test these assumptions using a stage model of decision making.

Young Families Support Program
Trustees of Health and Hospitals of the City of Boston
Adolescent Center, ACC-2
Boston City Hospital
818 Harrison Avenue
Boston, MA 02118
(617) 534-5989

OSAP/MCHB
SP-01860
07/01/90–06/30/95
Project Director(s):
Teresa M. Kohlenberg, M.D.

The Young Families Support Program aims to improve the medical and social outcomes of pregnancy and parenting for adolescent mothers (and their children) with problems related to chemical dependency. The program provides treatment of addictions integrated with medical care and intensive social services. Special needs of adolescents are addressed by providing flexible interventions through a single worker who is available for home or clinic visits. This program will develop educational and planning materials which are appropriate for use with adolescent mothers of diverse cultural backgrounds.

Mother and Infant Substance Abuse Network
Detroit Health Department
1151 Taylor Street
Detroit, MI 48202
(313) 876-4228

OSAP/MCHB
SP-01619
09/01/89–08/31/91
Project Director(s):
Darlinda VanBuren, M.P.H.

The Detroit Health Department's Mother and Infant Substance Abuse Network will coordinate substance abuse and maternal/infant care for 250 low-income, substance-abusing pregnant women. Treatment services will be provided by the Eleanor Hutzel Recovery Center, the only local agency which provides both substance abuse treatment and prenatal care for pregnant women. Case management services will ensure coordination of case finding; quality assurance; prenatal/postpartum and followup services; and medical, social, and substance abuse services to participating clients. This program will impact substance-using women and their infants within the city of Detroit by making treatment available and accessible and by increasing the number of positive birth outcomes.

Women and Infants at Risk
Project Transition/League of Catholic Women
16260 Dexter
Detroit, MI 48221
(312) 862-3400

OSAP/MCHB
SP-02244
07/01/90–06/30/95
Project Director(s):
Barbara Sampson
Sheryl Pimlott

The two primary goals of the program are to: (1) Increase the availability and accessibility of prevention and treatment services for prenatal and postnatal substance-abusing women who are in conflict with the law, and for their infants; and (2) promote awareness in the community and coordination among relevant State and local agencies to positively impact the lives of pregnant, addicted offenders and their infants.

F.O.C.U.S. Perinatal Substance Prevention Program
Model Cities Health Center, Inc.
430 North Dale Street
St. Paul, MN 55103
(612) 222-6029

OSAP/MCHB
SP-01610
09/01/89–08/31/94
Project Director(s):
Beverley O. Hawkins, Ph.D.

Model Cities Health Center, Inc., is implementing a 5-year community intervention project to improve perinatal outcomes among women of childbearing age at risk for cocaine use. Objectives and methods for intervention include use of mass media, community outreach and education, case-finding and case management, peer-led support groups, provider education on effects of cocaine use during pregnancy, parenting education, and early childhood assessment of growth and development.

Reducing the Risk of Low Birthweight and Its Adverse Sequelae
Minnesota State Department of Health
Division of Maternal and Child Health
P.O. Box 9441
717 Delaware Street, S.E.
Minneapolis, MN 55440
(612) 623-5166

MCHIP
MCJ-276008
10/01/87–09/30/91
Project Director(s):
Carolyn McKay, M.D.
Judith Brown, Ph.D.

The goal of this project is to reduce the risk of low birthweight and its adverse sequelae through prenatal weight gain intervention services. The project has incorporated a social marketing research approach into the development of intervention services. Social marketing research techniques employed include focus groups, interviews, and a questionnaire survey to gain insights into the knowledge, beliefs, and practices of the target population and the patient care providers who serve them. Project accomplishments include the development of a case management prenatal nutrition service model for prenatal weight gain and related dietary guidance; the publication of a report summarizing the results of the deliberations of a national panel of prenatal weight gain experts; and the translation of strategies for delivering intervention messages into educational tools and clinic protocols.

Youth Worker Outreach to Pregnant Street Youth
Face to Face Health and Counseling Service
642 East Seventh Street
St. Paul, MN 55106
(612) 772-2539

OSAP/MCHB
SP-02021
07/01/90–06/30/93
Project Director(s):
Ann Ricketts, M.S., M.P.H.

The Youth Worker Outreach to Pregnant Street Youth project is aimed at reaching out to high-risk, homeless, substance-using youth and connecting these youth with services provided at the Face to Face site. These services include pregnancy prevention; prenatal care; assessment, education, and counseling on chemical use and abuse; parenting education and support; peer support and counseling; and preemployment and life skills training. Youth in this project will be connected with other community services as well. A youth worker approach will be used.

Perinatal Substance Abuse Project for St. Louis
People's Health Centers, Inc.
5701 Delmar Boulevard
St. Louis, MO 63112
(314) 367-7848

OSAP/MCHB
SP-01553
05/01/90–04/30/95
Project Director(s):
Betty Jean Kerr

The purpose of the Perinatal Substance Abuse Project for St. Louis is to provide perinatal users of tobacco, alcohol, and/or drugs with comprehensive onsite counseling by a mental health counselor, and outpatient or inpatient substance abuse treatment in coordination with the health services provided through the Comprehensive Perinatal Care Project in St. Louis, Missouri. Services for substance use are integrated into the existing case management protocols for the 3,000 perinatal users at the community health centers. Services for substance abuse are provided on an outpatient basis at Black Alcohol/Drug Service Information Center (BASIC) and on an inpatient basis at the St. Mary's Hospital Chemical Dependency Program and the Deaconess Hospital Chemical Dependency Program.

Second Chance: Center for Drug-Addicted Pregnant Women
New Jersey Department of Health
Maternal and Child Health Services
CN 364, 363 West State Street
Trenton, NJ 08625
(609) 292-5616

OSAP/MCHB
SP-02017
07/01/90–06/30/95
Project Director(s):
George J. Halpin, M.D., M.P.H.
Laurie Nsiah-Jefferson

The purpose of Second Chance: Center for Drug-Addicted Pregnant Women is to demonstrate that increased access to drug treatment services, provision of dedicated community support, and neurodevelopmental assessment with treatment referral of drug-exposed infants will improve the short- and long-term health outcome for chemically dependent pregnant women and their children. This project is an expansion of an existing program of coordinated perinatal care and addiction treatment services.

Milagro Program
University of New Mexico School of Medicine
Department of Obstetrics and Gynecology
Ambulatory Care Building, 4th Floor
Albuquerque, NM 87131
(505) 272-6906

OSAP/MCHB
SP-01450
09/01/89–08/31/94
Project Director(s):
Luis B. Curet, M.D.
Lynn A. Brady, M.A.

The purpose of this project is to develop a well-organized core perinatal program for high-risk pregnant substance abusers and their infants to decrease the rates of infant morbidity and infant mortality; to enhance pregnancy outcome; and to develop a healthy attachment bond between mother and infant. Services will be delivered to this high-risk population through a multidisciplinary team approach.

Healthy Babies Program
Society for Seamen's Children
26 Bay Street
Staten Island, NY 10301
(718) 447-7666

OSAP/MCHB
SP-01876
07/01/90–06/30/95
Project Director(s):
Debbie Stinson, M.S.W.

The goal of the Healthy Babies Program is to provide comprehensive drug rehabilitation counseling and case management to lead a pregnant woman to a sober, stable, and healthy lifestyle for herself and her baby. The program will be sensitive to each participant's needs to encourage utilization of services both onsite and offsite. Innovative and varied activities will be offered, including self-help groups, biofeedback, babysitting services, and nutrition and exercise classes. Assessment tools as well as necessary educational materials will be developed as needed.

Improved Prenatal Detection of the Fragile X Syndrome
Research Foundation for Mental Hygiene, Inc.
Institute for Basic Research in
Developmental Disabilities
1050 Forest Hill Road
Staten Island, NY 10314
(718) 494-5236

Research
MCJ-360587
10/01/89–09/30/94
Project Director(s):
Edmund C. Jenkins, Ph.D.
Michael S. Krawczun, Ph.D.

The fragile X syndrome, the most prevalent inherited form of mental retardation, is preventable by prenatal testing. Prenatal diagnosis is not yet widely available because the testing is technically difficult and is not 100 percent reliable. The goal of this project is to develop a more reliable prenatal test.

Maternal Smoking and Vitamin/Antioxidant Status
Our Lady of Mercy Medical Center
600 East 233rd Street
Bronx, NY 10466
(212) 920-9215 or 920-9214

Research
MCJ-360582
06/01/89–05/31/92
Project Director(s):
Edward P. Norkus, Ph.D.

This research study will determine if the low-to-deficient levels of vitamin C and vitamin E found in the newborn infant persist or reappear during early infancy as the infant becomes a passive cigarette smoker in the home. Second, this research will determine if human breast milk from cigarette-smoking mothers contains adequate vitamin C and vitamin E to meet the nutritional needs of the infant during lactation. Third, this research will determine if vitamin C and E supplementation of pregnant women who smoke improves the low-to-deficient nutritional status of mother and baby.

Maternity, Infant Care—Treatment Intervention Program for Pregnant and Postpartum Women and Their Infants (MIC-TIP)
Medical and Health Research Association
of New York City
40 Worth Street, Room 720
New York, NY 10013
(212) 285-0220

OSAP/MCHB
SP-01150
09/01/89–08/31/94
Project Director(s):
Donna O'Hare, M.D.
Marie Littlejohn

The goals of the project are to reduce substance abuse, improve birth outcomes, and reduce the extent to which infants are affected by maternal substance use in a group of maternity patients in three New York City prenatal clinics via a comprehensive, case-managed approach. This approach will utilize existing community resources, including drug treatment, social service, and community organizations. Activities will include outreach, a broad range of maternity and drug treatment services, intensive followup, parenting education, postpartum home visits, and supportive followup to assist patients in obtaining and utilizing existing community services. A community resource manual will be developed.

Multicultural Prenatal Drug and Alcohol Prevention Project
Women's Action Alliance
370 Lexington Avenue, Suite 603
New York, NY 10017
(212) 532-8330

OSAP/MCHB
SP-01781
07/01/90–03/31/95
Project Director(s):
Ashaki Taha-Cisse

The purpose of this project is to decrease the number of women using drugs or alcohol before and during pregnancy in two target low-income Mexican-American and African Caribbean communities by means of a series of educational support groups and referral activities. Two women's centers, one in Chicago and one in New York City, will serve as the hubs for a variety of counseling, support, education, referral, prenatal care, and drug treatment services. Weekly educational support group sessions aimed at increasing understanding of the risks associated with drug use during pregnancy and the development of strategies, skills, and alternatives to reduce drug use will take place at each center. These sessions are offered to women of childbearing age and to pregnant, drug-using women. Relevant educational materials will be reviewed, modified, or developed for greater gender, language, culture, and literacy appropriateness.

Parent and Child Enrichment Project
New York City Department of Health
Bureau of Maternity Services and Family Planning
280 Broadway, Room 303
New York, NY 10007
(212) 566-7735

OSAP/MCHB
SP-01691
09/01/89–08/31/94
Project Director(s):
Cynthia R. Driver, M.P.H., R.N.C.

The purpose of the Parent and Child Enrichment (PACE) Project is to provide chemically dependent pregnant and postpartum women, especially cocaine and crack users, with comprehensive outpatient drug treatment and health services. Using the resources of existing community agencies, comprehensive services will be organized and integrated at one site to improve access. The infants and preschool children of enrolled women will receive pediatric care onsite, and needed social services, such as child care, will be provided.

Substance Abuse Prevention Program for Pregnant and Postpartum Adolescents
St. Luke's–Roosevelt Hospital Center
428 West 59th Street
New York, NY 10019
(212) 523-2122

OSAP/MCHB
SP-02887
09/01/90–08/31/95
Project Director(s):
Alwyn T. Cohall, M.D.

Through this project, St. Luke's-Roosevelt Hospital Center will augment existing prenatal and antepartum care for high-risk black and Hispanic adolescents with substance abuse prevention services. Case-managed services will be provided in a family-oriented, multidisciplinary program that coordinates substance abuse services; psychosocial support groups for pregnant and parenting adolescents, their partners, and families; obstetric and pediatric care; vocational and educational services; and parenting education. The adolescents will be encouraged to bring their partners to the sessions, as well as their children (for pediatric evaluation). Volunteer "grandmothers" will supervise the children while their mothers are occupied.

Women in Need of Services
Presbyterian Hospital in the City of New York
Women and Children Care Center
622 West 168th Street
11 West
New York, NY 10032
(212) 305-9099

OSAP/MCHB
SP-01182
07/01/90–08/30/95
Project Director(s):
Evelyn Ullah, M.S.W.

Women in Need of Services provides acupuncture treatment and comprehensive social work services to substance-abusing pregnant and postpartum women. One of the major goals of the program is to increase the availability and accessibility of prevention, early intervention, and treatment services to enable drug-addicted women to sustain themselves in the community and to care for their children.

Women's and Infant's Substance Abuse Program
Robeson Health Care Corporation
P.O. Box 1629
Pembroke, NC 28372
(919) 521-9355

OSAP/MCHB
SP-01601
09/01/89–08/31/94
Project Director(s):
Jinnie Lowery, M.P.H.

The demonstration project will develop an intensive outpatient treatment program for perinatal patients and their children within the context of a rural community health center. The goal of the program is to decrease the amount of drugs and alcohol used by the perinatal patients, decrease the effects of fetal exposure to alcohol and drugs, and increase the coordination among service providers.

Born Free: A Perinatal Substance Abuse Program
Miami Valley Hospital
1 Wyoming Street
Dayton, OH 45409
(513) 220-2676

OSAP/MCHB
SP-01108
02/01/90–01/31/95
Project Director(s):
Louis Buttino, Jr., M.D.

The purpose of this project is to provide a community-based perinatal substance abuse program which will decrease perinatal substance abuse and decrease maternal and perinatal morbidity and mortality secondary to cocaine use. Born Free is a comprehensive, multisite program of high-risk obstetrics care, structured education and group therapy, social service attention, and implemented individualized plans of treatment/care for mothers and infants extending 1 year postpartum.

Hope for Families
Saint Vincent Medical Center
Department of Pediatrics
2213 Cherry Street
Toledo, OH 43608
(419) 321-3589

OSAP/MCHB
SP-01107
09/01/89–08/31/91
Project Director(s):
Asha Patel

Hope for Families is designed to involve the general community, lay and professional, in preventing substance use during pregnancy through education and awareness of the full scope of the problem. The project uses the public health approach of primary, secondary, and tertiary prevention. Primary prevention is achieved through education and awareness activities; secondary prevention is achieved through early identification of the problem with toxicology screening. Tertiary prevention minimizes the consequences of substance use through aggressive intervention. Specifically, Hope for Families will serve 175 substance-using pregnant women from a central city population. Through comprehensive health care, substance use treatment, group process, and social services, these women will reduce or eliminate substance use during and after pregnancy.

Alcohol and Drug Abuse in Pregnancy Prevention and Training
Oklahoma State Department of Health
Maternal and Child Health Service
Room 705
P.O. Box 53551
Oklahoma City, OK 73152
(405) 271-4470

OSAP/MCHB
SP-01704
02/01/90–01/31/95
Project Director(s):
Terrie Fritz, M.S.W.

The Alcohol and Drug Abuse in Pregnancy Prevention and Training (ADAPPT) project is a demonstration project financed by the Office of Substance Abuse Prevention and administered by the Oklahoma State Department of Health, Maternal and Child Health Service, Social Work Section. Through the development of a multilevel prevention and service coordination program, the project seeks to improve and expand services throughout the State to substance-abusing women of childbearing age.

Alcohol and Drug Abuse Prenatal Treatment Program
Multnomah County Office of Women's
Transition Services
421 Southwest 5th Street
Room 600
Portland, OR 97205
(503) 248-5374, ext. 6629

OSAP/MCHB
SP-01552
09/01/89–08/31/91
Project Director(s):
Joanne Fuller

The Alcohol and Drug Prenatal Treatment (ADAPT) Program of the Office of Women's Transition Services in Multnomah County, Oregon, was developed to address the problem of substance-abusing pregnant women booked in the Multnomah County jail. The goals and objectives of the ADAPT Program include: (1) Births of healthier babies to female offenders; (2) involvement in alcohol and drug treatment services and prenatal care for this population of female offenders; and (3) ending substance abuse during pregnancy in this population.

Intervention Project for High-Risk Pregnant Women (Project Cradle)
Washington County Department of Health and
Human Services
155 North First Avenue
Hillsboro, OR 97124
(503) 648-8881

OSAP/MCHB
SP-01173
02/01/90–01/31/95
Project Director(s):
James Peterson, M.S.W.

The purpose of Project Cradle is to provide pregnant drug abusers with intensive outpatient chemical dependency treatment, case management, community health nursing services, and parenting skills education. The project is also designed to link program participants with health care and other supportive services. It is hoped that, by providing comprehensive services, substance abuse will be reduced and birth outcomes will be improved.

New Start: Drug Free Beginnings for Moms and Babies
Sacred Heart General Hospital
950 Patterson Street
Eugene, OR 97401
(503) 686-8557

OSAP/MCHB
SP-01633
02/01/90–01/31/95
Project Director(s):
Demi Rewick, R.N.

New Start: Drug-Free Beginnings for Moms and Babies (NSP) facilitates the early identification of chemically dependent pregnant women and coordinates services to strengthen the emotional and social support received by these women. NSP will increase clients' access to substance abuse services and promote their continued involvement in prenatal care addiction treatment, parenting classes, and other appropriate activities. NSP is available to conduct educational seminars for health professionals and addiction treatment resource staff as well as a variety of community and social service agencies. The focus is the special needs of chemically dependent pregnant women and the effect of drugs/alcohol on the developing infant.

Pre/Postnatal Case Management Program
Jefferson County Health Department
344 South Sixth, Suite D
Madras, OR 97741
(503) 475-2266

OSAP/MCHB
SP-01922
07/01/90–06/30/93
Project Director(s):
Linda K. Allen, R.N., B.S.

This project provides case management to pregnant and postpartum women and their infants identified as having risk factors associated with drug use during the prenatal period. Using referrals from other agencies, physicians, social workers, and the justice system, as well as birth certificate review of every newborn in the county, a public health nurse completes a home assessment of the client (and family) for physical, emotional, social, and environmental risk factors in the prenatal and postnatal period. Based upon the assessment, a care coordination plan is developed and implemented, assuring access to prenatal care and education, Special Supplemental Food Program for Women, Infants and Children (WIC) assistance, financial assistance, drug and alcohol counseling, immunizations, early intervention, and health screenings as necessary for the infant. In addition, family planning for the mother and other appropriate information and referral are provided. Frequent home and clinic contacts between the nurse and client promote compliance with the care plan.

Project Network
Emanuel Hospital and Health Center
2801 North Gantenbein Avenue
Portland, OR 97227
(503) 280-4837

OSAP/MCHB
SP-01562
09/01/89–08/31/94
Project Director(s):
Jeanne S. Cohen, R.C.S.W.

Project Network is a comprehensive, compassionate care approach for pregnant drug users and their infants. It is a program designed to promote early intervention and prevention. A broad range of services provides continuity of contact, support, intensive outpatient drug treatment, education and advocacy for enrollees, direct access to perinatal and pediatric care until infants reach 2 years of age, and incentives for participants to avail themselves of care and to remain in drug treatment until they reach recovery. Direct service is enhanced through a system of managed care in coordination with a multitude of community agencies which provide a formal network of resources.

Support, Treatment, and Rehabilitation Team Project
Oregon Health Division
P.O. Box 231
1400 Southwest Fifth Avenue, Room 508
Portland, OR 97201
(503) 229-5757

OSAP/MCHB
SP-01675
02/01/90–01/31/95
Project Director(s):
Jill R. Nathman, M.S., R.N.

This project is a jointly sponsored endeavor of the State of Oregon's Health Division, Children's Services Division, and Office of Alcohol and Drug Abuse Programs. It seeks to: (1) Improve the health status of substance-abusing pregnant women and their affected children; (2) reduce the usage of drugs and alcohol by pregnant substance abusers; and (3) improve parenting skills and decrease family dysfunction in families affected by substance abuse in pregnancy. The target population, pregnant women who abuse cocaine and/or methamphetamine, will be identified early in their pregnancies through county pregnancy testing sites and through referrals from the Children's Services Division, correctional facilities, or IV drug user outreach projects. Core services include comprehensive drug treatment, comprehensive prenatal care, parent training, and social support services.

Coordinated Maternal Addiction Program
Saint Francis Medical Center
45th and Pennsylvania Avenue
Pittsburgh, PA 15201
(412) 622-8069

OSAP/MCHB
SP-01606
02/01/90–01/31/92
Project Director(s):
Janice P. Zelenak, Ph.D.

This project provides comprehensive and coordinated services to women who abuse drugs and alcohol during their pregnancy. The overall goal of the project is to provide coordinated services which would bring about improved birth outcomes for infants born to women who abuse drugs and alcohol. Services provided by the project are aimed at improving the identification, referral, and retention of women who enroll in the program.

Help at PPC–AEMC for Substance-Abusing Pregnant Women
Philadelphia Psychiatric Center
Ford Road and Monument Avenue
Philadelphia, PA 19131
(215) 877-6408

OSAP/MCHB
SP-01187
02/01/90–01/31/95
Project Director(s):
Alfred S. Friedman, Ph.D.

This program is an outpatient day treatment service that offers individual, group, and family counseling for substance-abusing pregnant and postpartum women. The purpose of this program is to treat such women as early as possible in their pregnancies in order to: (1) Achieve either abstinence or a reduction in the degree of their substance use, (2) provide support and assistance in solving their daily reality problems, and (3) enrich their level of functioning in their mothering roles and in their coping with life situations. The program includes a series of group experiences and activities aimed at diminishing and resisting drug use during and after pregnancy.

Home Visiting Program
Health Federation of Philadelphia
1211 Chestnut Street, Suite 801
Philadelphia, PA 19107
(215) 567-8001

OSAP/MCHB
SP-02174
07/01/90–06/30/95
Project Director(s):
Natalie Levkovich

The purpose of this project is to identify pregnant and postpartum women who abuse, or are at particularly high risk for abusing, drugs or alcohol. These clients will then be provided with coordinated, multidisciplinary, culturally sensitive services, including assessment, home visiting, counseling, health and parenting education, and case management integrated with prenatal, postpartum, and pediatric medical care. The project team consists of three lay home visitors (indigenous community workers), a nurse, and a clinical social worker. Services will be offered at a community-based health center with links to other existing community resources. The anticipated outcomes include prevention and/or reduction of maternal substance abuse, improved birth outcomes and infant health status, and enhanced parenting skills.

Prevention of Cocaine Abuse by Pregnant Women
Medical College of Pennsylvania
Department of Pediatrics
3300 Henry Avenue
Philadelphia, PA 19129
(212) 842-6689

OSAP/MCHB
SP-01565
02/01/90–01/31/93
Project Director(s):
Sonja Imaizumi, M.D.

Cocaine-abusing pregnant women and their infants constitute a population at risk for significant morbidity. By providing psychosocial support to cocaine-abusing women through substance abuse treatment and psychiatric intervention, when indicated, and by teaching appropriate parenting skills, this program aims to decrease the incidence of child abuse and neglect, failure to thrive, and neurodevelopmental delays in the infants born to these mothers.

Rural Community Interventions for Substance-Abusing Women
Pennsylvania State University
Human Development Building, 304 East
University Park, PA 16802
(814) 863-0855

OSAP/MCHB
SP-01507
02/01/90–01/31/95
Project Director(s):
Judith R. Vicary, Ph.D.

This project will develop community programs targeting the prevention and remediation of alcohol, tobacco, and other drug use during pregnancy and the postpartum period in a representative disadvantaged rural community. A community assessment and task force will be the basis for the development of community-based coordination with schools and agencies; the development and integration of new programs reflecting local needs; and increasing accessibility and acceptance of services, thereby affecting substance use behaviors of at-risk women. The project includes school-based curricular integration of a primary prevention program in junior and senior high schools, services for pregnant or parenting adolescents, and parenting/personal skills and substance abuse education for nonschool-based pregnant women and mothers of small children through local organizations. Complete process and outcome evaluations will be conducted on both the prevention and intervention activities, with production of a replicable process manual and curriculum.

Blackstone Valley Perinatal Network MCH Substance Abuse Project
Blackstone Valley Perinatal Network
Memorial Hospital of Rhode Island
111 Brewster Street
Pawtucket, RI 02860
(401) 722-6000

OSAP/MCHB
SP-02358
07/01/90–06/30/95
Project Director(s):
Larry Culpepper, M.D., M.P.H.
Noreen Mattis, R.N., M.Ed.

The program is designed to create a community-based program to help (1) women who are current substance abusers or at high risk of abusing substances, (2) their children, and (3) their families. The program provides a model of linking neighborhood health centers and a community hospital outpatient department with substance treatment and other community agencies to prevent, identify, and treat substance abuse and help families with substance-exposed infants.

***Mitakuye Oyasin* (All My Relatives)**
Indian Health Service
Aberdeen Area
Federal Building, Room 309
Aberdeen, SD 57401
(605) 384-3894

OSAP/MCHB
SP-02689
09/01/90–08/31/95
Project Director(s):
Adelia Cuka, B.S.N., R.N.C.

Substance use for the Yankton Sioux is mainly in the form of alcohol and cigarettes. The highest prevalence of Native American drinking is reportedly in the 25- to 44-year-old age group. Our project goals are to: (l) Decrease substance use during pregnancy; (2) improve the outcome of pregnancy; (3) improve the health and development of the infant; and (4) provide comprehensive services to the prenatal/postpartum woman and her infant.

Perinatal Care and Substance Abuse Prevention Project
Oglala Sioux Tribe
1 Preschool Road, P.O. Box 279
Porcupine, SD 57772
(605) 867-5170

OSAP/MCHB
SP-02653
09/01/90–08/31/95
Project Director(s):
Roger Iron Cloud

This project has three major goals: (1) Build resiliency and protective factors for high-risk pregnant and parenting adolescent mothers and their families, enabling them to resist the dangers of alcohol, cigarette, and drug use/abuse; (2) reduce the risk factors for alcohol and drug use impacting the Oglala Sioux pregnant and parenting adolescent mothers by restoring the integrity and nurturing role of the family; and (3) create a service provider network for coordinating efforts, pooling resources and talents, and improving the availability and delivery of appropriate services in the prevention and treatment of alcohol and drug abuse for Native American youth and their families.

Alcohol and Substance Abuse Pregnancy Intervention Program
Meharry Medical College
1005 D. B. Todd Boulevard
Nashville, TN 37208
(615) 327-6284

OSAP/MCHB
SP-02010
07/01/90–06/30/95
Project Director(s):
Edward Hills, M.D.
Rhonda C. Cunningham, Ph.D.

The Alcohol and Substance Abuse Pregnancy Intervention Program provides comprehensive coordination of medical and related social support services for chemically dependent pregnant women and their infants. Twelve Federal, State, and private programs housed at Meharry Medical College are utilized to increase access to health care for this population. A minimum of 640 women and their children will be served.

Maternal Substance Abuse Project
San Antonio Metropolitan Health District
332 West Commerce Street
San Antonio, TX 78285
(512) 226-3891

OSAP/MCHB
SP-01632
02/01/90–01/31/95
Project Director(s):
Edmund Backa, M.A., L.P.C.

The Family Services Center will provide a program of medical, psychological, and educational support to 120 women who have been identified as substance abusers and their infants to age 3. Program participants will be assigned to one of three specially designated clinics and will receive medical care, group counseling, support, and education during clinic visits. In addition, each participant will be assigned to a nurse or social worker who will provide monthly home visits and who will function as a case manager. After the birth of the infant, well-child care and groups offering parent education, support, and stress reduction, as well as substance-cessation assistance, will be offered at the clinics. Home visits will continue, the home environment will be assessed, and community resources will be utilized.

Mom and Baby—Drug Free—For the Health of It
Tarrant County Hospital District
1500 South Main Street
Fort Worth, TX 76104
(817) 531-3314

OSAP/MCHB
SP-02240
07/01/90–07/31/93
Project Director(s):
Barbara Beatty

The purpose of the Mom and Baby—Drug Free—For the Health of It project is to provide basic education on substance abuse during pregnancy to women receiving obstetrical care at a community clinic located in an underserved area of Tarrant County, Texas. After the initial class, women may voluntarily enroll in the program track where support services are brought to the clinic site, or in the track where the client receives services which have already been set up in the community. Drug education, case management, and client referrals will be provided by registered nurses who are certified alcohol and drug abuse counselors (CADAC) and are at the clinic on a full-time basis. Incentives, such as maternity tops and bus tokens, will be given to women who participate.

Project MOM: Drug Counseling for Childbearing Women
Houston Council on Alcoholism and Drug Abuse
3333 Eastside Street, Suite 111
Houston, TX 77098
(713) 520-5502

OSAP/MCHB
SP-01162
07/01/90–06/30/95
Project Director(s):
Caroline B. Attwell

The goal of Project MOM is to decrease the incidence of drug addiction among low-income women patients of Ben Taub Hospital through a comprehensive counseling and education program. Project MOM will provide alcohol and drug education and counseling for pregnant and postpartum women seeking services through maternity and neonatal clinics at large public hospitals. Counselors will work with hospital social workers and other community resources to assist patients in obtaining Medicaid, transportation, child care, and food stamps, and to solve other living problems which may affect the successful maintenance of a drug-free lifestyle.

Spokane Family Success Project
Spokane County Health District
Community and Family Services
West 1101 College Avenue
Spokane, WA 99201
(509) 458-2558

OSAP/MCHB
SP-02750
09/01/90–08/31/95
Project Director(s):
Barbara Feyh
Kathleen Reynolds, R.N., M.A.

The Spokane Family Success Project will coordinate the comprehensive, interagency, multidisciplinary delivery of high quality services which reduce substance abuse and its negative side effects among low-income pregnant and postpartum women and their infants. The program combines an innovative consumer-driven service strategy and a comprehensive case management system which empowers recipients by involving them in their planning. It features a total quality control system, statistical process control, which also functions as a process evaluation of the project. The program also features a comprehensive outcome evaluation process.

Targeted Adolescent Pregnancy Substance Abuse Project
University of Washington Medical Center
Social Work Department RC-30
1959 Northeast Pacific Street
Seattle, WA 98195
(206) 548-4370

OSAP/MCHB
SP-00472
09/01/89–08/31/91
Project Director(s):
Nancy Hooyman

The Targeted Adolescent Pregnancy Substance Abuse Project is a collaborative effort between the University of Washington School of Social Work and the Seattle/King County Public Health Department. Specialized drug prevention services are provided to high-risk pregnant/parenting young women and their support network as both clinical expertise and literature indicate that pregnant and/or parenting young women are at higher risk for substance abuse because of the stress brought on by pregnancy and parenting at an early age. Three interventions—case management, drug prevention skills training, and parenting education—are provided to the client in order to: (1) Reduce stress in the client environment, and (2) provide life skills training which will enable the client to develop and maintain a successful drug-free lifestyle.

Model Projects for Pregnant and Postpartum Women and Their Infants
Combined Community Services Board
235 West Galena Street, Suite 270
Milwaukee, WI 53212
(414) 289-6660

OSAP/MCHB
SP-02123
07/01/90–08/30/95
Project Director(s):
Alice Neede

Project Fresh Start is a demonstration program directed at the inner city of Milwaukee (zip code areas 53205, 53206, and 53212) and designed for women and children who are affected by substance abuse, particularly by the use of cocaine during the prenatal period. The overall purpose of the project is to make available intensive, family-centered, comprehensive, coordinated care that is specially designed to respond to the needs of women and children. This project is essentially a case management/service provision program targeting pregnant women who are substance abusers. Program activities and services will include child care, counseling, health/nutrition basic living skills, program incentives from local businesses, and other needed social services. The family resource center will serve as the program site and will be accessible to the target population. A program brochure and a resource directory will be developed.

Perinatal Services for Substance-Using Indian Women
Great Lakes Inter-Tribal Council
561 Peace Pipe Road
P.O. Box 9
Lac du Flambeau, WI 54538
(715) 588-3324

OSAP/MCHB
SP-01884
07/01/90–06/30/95
Project Director(s):
Carol Wright

This project intends to demonstrate that a collaborative, culturally sensitive approach by multiple organizations in the delivery of comprehensive services for Native American substance-using pregnant and postpartum women and their infants will decrease substance use among the women, improve birth outcomes, and reduce the severity of impairment among the children. This will be accomplished by identifying and closing gaps in service, as well as by introducing specialized, culturally sensitive service and support systems for the target population. Native American women will be hired as alcohol and other drug abuse counselors, and a number of agencies will be contracted with to provide either direct service or "training of trainer" packages.

Rural South Central Wisconsin Perinatal Addiction
University of Wisconsin at Madison
Lowell Hall, Room 521
610 Langdon Street
Madison, WI 53703
(608) 262-8987 or 262-5407

OSAP/MCHB
SP-01641
09/01/89–08/31/94
Project Director(s):
Raymond Kessel, Ph.D.

The Rural South Central Wisconsin Perinatal Addiction project is a partnership between the University of Wisconsin, perinatal centers, primary care providers, and community-based agencies. It provides coordinated services in prevention, intervention, treatment, and followup for women and infants who may be affected by substance use during the perinatal period. Project activities include public awareness/outreach, community education and training, direct clinical services, support for pregnant adolescents, consultation and technical assistance in evaluation and replication planning, and community organization and networking to strengthen rural county systems addressing perinatal substance abuse issues.

Wyoming Substance Abuse Prevention Program
University of Wyoming School of Nursing
P.O. Box 3065, University Station
Laramie, WY 82071
(307) 766-3902

OSAP/MCHB
SP-02000
07/15/90–06/30/93
Project Director(s):
Norma N. Wilkerson, R.N., Ph.D.

The purpose of this project is to develop a model program which will serve to mobilize rural/frontier community involvement in activities to identify, diagnose, and treat substance-abusing pregnant and postpartum women and their infants. Primarily, this program will help promote training, involvement, service delivery, and coordinated participation of multiple rural/frontier community organizations in the delivery of comprehensive services for substance-using pregnant and postpartum women and their infants. The program will increase the availability and accessibility of prevention, early intervention, and treatment services for the target population. Secondarily, it will decrease the incidence and prevalence of substance use and improve the birth outcomes for women in these target populations.

Maternal Health

Systems Development for Perinatal Services

American Samoa Healthy Generations Project
American Samoa Department of Health
LBJ Tropical Medical Center
Pago Pago, AS 96799
(684) 633-4559

MCHIP
MCJ-606003
10/01/88–09/30/91
Project Director(s):
Marilyn Anesi, R.N., C.N.M.

This project seeks to reduce fetal and neonatal mortality rates in the U.S. territory of American Samoa. The project will focus on increasing the utilization of prenatal health care services by converting the present inaccessible, centralized system of care to a multilocation, community-based system.

Maternity Case Management Project
Arizona Department of Health Services
1740 West Adams
Phoenix, AZ 85007
(602) 542-1870

MCHIP
MCJ-046006
10/01/88–09/30/91
Project Director(s):
Jane Pearson, R.N.

This project seeks to reduce low birthweight rates among project participants by implementing an aggressive case management system that will improve utilization of and compliance with comprehensive prenatal care. The project provides nurse case management services to pregnant women who are enrolled in Medicaid. The project is implemented through contractual arrangements with local agencies who hire the nurse case manager. The local agency also assures that pregnant women receive appropriate risk screening, nutritional counseling, WIC referrals, and prenatal education.

Perinatal Risks and Outcome Among Low-Income Immigrants
San Diego State University
Department of Sociology
San Diego State University
5300 Campanile Drive
San Diego, CA 92182
(619) 594-2874

Research
MCJ-060595
05/02/90–04/30/92
Project Director(s):
Ruben G. Rumbaut, Ph.D.

The proposed research aims to address the question of unexpectedly favorable outcomes through the comparative analysis of an indepth data set of 7,000 low-income women stratified by ethnicity (Mexican-origin, Southeast Asian, and non-Hispanic whites) and nativity (foreign born and U.S. born). From a review of the literature, a conceptual framework will be developed to examine the effects of a wide range of secondary risk factors (sociocultural and biomedical) and primary risk factors (sociocultural and biomedical) upon perinatal outcomes (conceptualized as a continuum from mortality to morbidity to optimum health).

Southeast Asian Health Project
United Cambodian Community
1432 Atlantic Avenue
Long Beach, CA 90813
(213) 491-9112

MCHIP
MCJ-066029
10/01/89–09/30/92
Project Director(s):
Lillian S. Lew, R.D., M.Ed.

The primary goals of this project are: (1) To increase positive health behaviors in prenatal, maternal, and child care among Southeast Asians; and (2) to increase the number of health professionals trained in Asian cultural values and health practices, enabling provision of culturally sensitive health care to Southeast Asians. The program's outreach activities will target the women responsible for family nutrition and the opinion leaders within the Southeast Asian community, introducing new behavioral concepts while encouraging participants to adopt them at their own speed. The Southeast Asian Health Project will provide a model which can be adapted for use among other ethnic groups whose values, customs, and languages are unfamiliar to the existing health care system.

Improvement of Perinatal Health Care: Developing a Collaborative Ambulatory Research Network
American College of Obstetricians and Gynecologists
409 12th Street, S.W.
Washington, DC 20024-2188
(202) 638-5577

Research
MCJ-117016
07/01/90–06/30/95
Project Director(s):
Warren H. Pearse, M.D.

This Collaborative Ambulatory Research Network (OB-GYN-CARN) will provide a national structure for conducting, analyzing, and disseminating primary OB/GYN practice pattern research. Fifty OB/GYN practices with wide geographic and practice configuration variability will be selected to collaborate in the research network. Each year, one priority topic will be selected jointly by ACOG and the Maternal and Child Health Bureau for study. The topics for consideration include evaluations of an enhanced program of prenatal care services, prenatal screening for glucose tolerance for diabetes mellitus, and vaginal birth after previous cesarean delivery.

Louisiana Healthy Futures Program
Louisiana Department of Health and Hospitals
Office of Public Health
325 Loyola Avenue, Room 612
New Orleans, LA 70112
(504) 568-5395

MCHIP
MCJ-226016
10/01/88–09/30/92
Project Director(s):
Irene Williams

The "Healthy Futures" Program addresses the high infant mortality rate in Orleans Parish by increasing the number of high-risk pregnant women who receive early and continuous prenatal care services. The project will develop a system of community-based outreach, provide aggressive case management for high-risk women, increase accessibility through alternative sources of public and private care, expand prenatal care to include uniform medical/psychosocial/economic risk assessment, and arrange for Medicaid reimbursement for these services.

Evaluation of the Guidelines for Maternal Transport
Johns Hopkins University
School of Hygiene and Public Health
Department of Maternal and Child Health
624 North Broadway
Baltimore, MD 21205
(301) 955-6802

Research
MCJ-240586
10/01/89–09/30/92
Project Director(s):
Donna M. Strobino, Ph.D.

The object of this research study is to evaluate the most recent perinatal guidelines for maternal transport. The study evaluates the extent to which the guidelines are followed and, when followed, whether outcomes are improved for the mother and her newborn. The study sample is population based, including transported and nontransported mothers and their newborns from Level I and II Southern New Jersey Perinatal Cooperative hospitals in 1984 and part of 1985.

Healthy Generations of Maryland
Maryland State Department of Health
and Mental Hygiene
Family Health Administration
201 West Preston Street
Baltimore, MD 21201
(301) 225-6749

MCHIP
MCJ-246005
10/01/88–09/30/92
Project Director(s):
Polly Harrison, M.D.

This project seeks to demonstrate the efficacy of family-focused, community-based, prevention-oriented nursing services in reducing the infant mortality rate in designated urban and rural areas. An MCH team, consisting of a community health nurse and a social worker, has been established in each of the target areas. Nursing activities include case management, primary intervention, community liaison, client advocacy, and health education. Social workers provide family needs assessments, assistance with access to financial resources, and family and individual counseling. The project serves as a catalyst for redefining the utilization of resources and the delivery of community-based services to Maryland's maternal and child population.

Lawrence Prenatal Support System
Massachusetts Department of Public Health
150 Tremont Street
Boston, MA 02111
(617) 727-5121

MCHIP
MCJ-256007
10/01/88–09/30/91
Project Director(s):
Ellen Gibbs, Ed.M.
Sarah Johnson

The goal of this project is to improve prenatal care utilization rates and birth outcomes among high-risk, low-income women, particularly Hispanic women, living in the city of Lawrence. The Lawrence Prenatal Support System will establish a coordinated service system for high-risk pregnant women; demonstrate a model of early and continuous case management which will include advocacy and support by bilingual, bicultural case managers; and coordinate public and private prenatal care services.

Minnesota Prenatal Care Coordination Project
Minnesota Department of Health
717 Southeast Delaware Street
P.O. Box 9441
Minneapolis, MN 55440
(612) 623-5431 or 623-5166

MCHIP
MCJ-276015
10/01/88–09/30/91
Project Director(s):
LaVohn Josten, Ph.D., R.N.
Carolyn McKay, M.D.

This project aims to reduce the incidence of poor birth outcome among low-income women whose prenatal care is paid for by medical assistance. The project will establish a statewide, locally based prenatal care coordination system that includes comprehensive, risk-appropriate prenatal care provided by a multidisciplinary team of prenatal care providers. The project educates providers to facilitate risk-appropriate prenatal care, care coordination, and education for high-risk women.

Sharkey–Issaquena Health Alliance
Luke Society–Cary Christian Health Center
1121 Grove Street
Vicksburg, MS 39180
(601) 638-1629

MCHIP
MCJ-288404
10/01/89–09/30/94
Project Director(s):
Peter A. Boelens, M.D.

The primary purpose of this project is to decrease the rates of adolescent pregnancy, infant mortality, and low birthweight births in Sharkey and Issaquena Counties. The staff of Cary Christian Health Center, working with local caregivers through the local agency of the Sharkey–Issaquena Health Alliance, will implement a comprehensive program that will (1) decrease the infant mortality rate and the incidence of low birthweight babies in the project area; (2) decrease the pregnancy rate among teenagers; (3) facilitate access to care and coordinate the manner in which perinatal care is delivered; (4) improve the community's understanding and knowledge of health-related matters; and (5) make members of the community more aware of child abuse and how to deal with it appropriately.

Evaluation of the Healthy Generations Project
University of North Carolina at Chapel Hill
School of Public Health
Department of Maternal and Child Health
Rosenau Hall, CB #7400
Chapel Hill, NC 27599-7400
(919) 966-5981

MCHIP
MCJ-377013
10/01/89–09/30/94
Project Director(s):
Milton Kotelchuck, Ph.D.

The goal of this evaluation is to examine the impact of the Healthy Futures and Healthy Generations programs and their component interventions in three areas: (1) Changes in the accessibility, competence, and capacity of the perinatal health care system; (2) changes in the timing, content, and coordination of perinatal services; and (3) changes in birth outcomes. Case studies will be written for 11 Southern States, tracing the process of the implementation of the Healthy Futures and Healthy Generations programs into the health care system.

Healthy Generations for Healthy Futures in North Carolina
North Carolina Department of Environment, Health and Natural Resources
Women's Health Section
Division of Maternal and Child Health
P.O. Box 27687
Raleigh, NC 27611-7687
(919) 733-7791

MCHIP
MCJ-376004
10/01/88–09/30/92
Project Director(s):
Nancy Phelps Hodges, M.P.H.

This project addresses problems such as fragmented clinical services, barriers to enrollment in Medicaid, and lack of support services, all of which contribute to North Carolina's high infant mortality rate. The goal of the project is to reduce infant mortality by increasing prenatal care services and by promoting preventive preconceptional approaches, access to services for infants, and other support services.

Performance System to Reduce Prematurity and Low Birthweight
University of North Carolina at Chapel Hill
Department of Maternal and Child Health
Rosenau Hall, CB #7400
Chapel Hill, NC 27599
(919) 966-5981

MCHIP
MCJ-376009
10/01/87–01/31/91
Project Director(s):
Jonathan B. Kotch, M.D., M.P.H.

The purpose of this project is to reduce prematurity and low birthweight in North Carolina's Southwest Perinatal Region III. This system provides a mechanism for conducting periodic, ongoing observation of program effectiveness and for monitoring public health staff performance in implementing clinic guidelines.

Perinatal Care Coordination Project
Columbus Health Department
181 South Washington Boulevard
Columbus, OH 43215
(614) 645-6424

MCHIP
MCJ-396009
10/01/88–09/30/91
Project Director(s):
Carolyn B. Slack, M.S., R.N.

This project seeks to decrease the occurrence of poor perinatal outcomes by improving both the utilization and the content of perinatal care services. An interdisciplinary team will work to improve client recruitment, enrollment, and retention procedures while implementing a care coordination service delivery model to better meet client needs.

Family Shelter Project
Philadelphia Department of Public Health
Coordinating Office for Drug and
Alcohol Abuse Programs
1101 Market Street, Suite 800
Philadelphia, PA 19107
(215) 592-4976

MCHIP
MCJ-426014
10/01/88-09/30/91
Project Director(s):
Bonnie Strahs

This project addresses the dramatic rise in homelessness and substance abuse, the relationship between the two problems, and the increasing number of homeless families. The Family Shelter Project provides leadership and coordination for a broad range of health, social, and educational services to be provided to pregnant women, mothers, and children in a therapeutic community which has been established within a city shelter for homeless families. In addition, the project has established a professional development collaborative to enhance the capacity of health professionals and those in related professions to serve the homeless, particularly the substance-abusing maternity services population.

Developing a Community MCH System in the Blackstone Valley
Brown University/Memorial Hospital of Rhode Island
Department of Family Medicine
111 Brewster Street
Pawtucket, RI 02860
(401) 722-6000, ext. 2236

MCHIP
MCJ-446006
10/01/87-09/30/91
Project Director(s):
Larry Culpepper, M.D., M.P.H.
Noreen Mattis, R.N., M.Ed.

This project will develop a network of community organizations involved in the identification of and response to perinatal and early infancy problems and the problems of young families. Specific goals include the development of a community MCH plan, the implementation of a data system for project sites, the integration of MCH programs with ongoing caregiving structures, the implementation of interagency protocols, and the modification of health behaviors and improvement of MCH utilization patterns.

Perinatal Health: Strategies for the 21st Century
National Perinatal Information Center
1 Blackstone Place
668 Eddy Street, Third Floor
Providence, RI 02903
(401) 274-0650

MCHIP
MCJ-446017
10/01/88-09/30/91
Project Director(s):
Rachel M. Schwartz, M.P.H.

The overall goal of this project is to serve as a focal point in strengthening and improving the organization and delivery of perinatal health services in the United States. To achieve this goal, the project has established three major subgoals: (1) To stimulate interest in what measures should be taken to improve perinatal health; (2) to create an environment for discussing the future of perinatal health; and (3) to establish a national agenda for improving systems of perinatal health care.

South Carolina Partnership for Healthy Generations
South Carolina Department of Health and
Environmental Control
2600 Bull Street
Columbia, SC 29201
(803) 737-4190

MCHIP
MCJ-456001
10/01/88–09/30/92
Project Director(s):
Marie C. Meglen, M.S., C.N.M.

The goal of this project is to reduce the infant mortality rate in South Carolina. To do so, the project will work to improve access to early and continuous prenatal care by addressing individual and systems problems; establish public/private task forces in six counties; ensure coordinated systems of perinatal care; and develop a priority programs agenda for the legislature and Maternal, Infant and Child Health Council (MICH) member groups.

Community Support Program for Early Discharged Mothers and Infants
Texas Tech University Health Sciences Center
4800 Alberta Avenue
El Paso, TX 79905-1298
(915) 545-6783

MCHIP
MCJ-486033
10/01/89–09/30/92
Project Director(s):
C. Antonio Jesurun, M.D.

Well newborns at R.E. Thomason General Hospital in El Paso are kept in the nursery up to 72 hours because of an inability to monitor infant neonatal development outside the hospital, while healthy mothers are discharged at 24 hours postpartum. This separation of the mother and infant has a negative impact on their health status, and the goal of this project is to achieve the successful joint early discharge of 20 percent of the mothers and babies at the hospital. Activities include prenatal education, social work services, 72-hour and 2-week newborn assessments, and provision of a phone line for health or parenting questions.

Maternal and Infant Care Access Project
Texas Department of Health
1100 West 49th Street
Austin, TX 78756
(512) 458-7700

MCHIP
MCJ-486002
10/01/88–09/30/92
Project Director(s):
Walter P. Peter, Jr., M.D.

The Maternal and Infant Care Access Project seeks to overcome fragmentation of perinatal care services through interdepartmental/interagency planning and cooperative efforts and through case management of high-risk pregnant women and their children. Interagency coordination is also reflected in statewide marketing efforts for early and continuous prenatal care through joint pamphlets, videos, and other materials.

Project Zip Code 84111: A Community-Based One-Stop Health Care Program for Pregnant Women and Infants
Department of Health
44 Medical Drive
Salt Lake City, UT 84113
(801) 584-8237

MCHIP
MCJ-496042
10/01/90–09/30/92
Project Director(s):
Thomas J. Wells, M.D., M.P.H.
Jillian Jacobellis, C.N.M., M.S.

This project aims to improve maternal and child health by creating a one-stop shopping health facility in the high-risk central city target area. This facility will offer full perinatal and pediatric services for pregnant women and their children in the target area, including an onsite Medicaid eligibility worker and WIC services. A transportation system will be developed and child supervision will be provided during clinic hours. Volunteer translators will be available for non-English-speaking clients. Perinatal and pediatric consultation services will be provided to clients of local health care providers.

Infant Health

Reducing Mortality and Morbidity

Alaska Infant Mortality Review Project
State of Alaska Department of Health and Social Services
Section of Maternal, Child and Family Health
P.O. Box H-06B
Juneau, AK 99811
(907) 274-7626

MCHIP
MCJ-026040
10/01/90–09/30/92
Project Director(s):
Rita A. Schmidt

The goal of this project is to have Alaska's multidisciplinary infant mortality review committee of health and social services professionals from State, Federal (Indian Health Service), and local agencies, as well as private practice, facilitate the reduction of Alaska's infant mortality rate through an integrated review process which will provide prevention and response information to health professionals and to the public.

Arkansas Infant Mortality Review Project
Arkansas Department of Health
4815 West Markham
Little Rock, AR 72205
(501) 661-2925

MCHIP
MCJ-056027
10/01/89–09/30/91
Project Director(s):
Deborah Bryant, M.D.
Susan Patton, R.N., B.S.N.

In spite of concentrated perinatal and neonatal services in Little Rock, the infant mortality and low birthweight rates in the surrounding area of Pulaski County are higher than the State average. The goal of this project is to develop an infant mortality review model in Pulaski County that will be utilized as part of a needs assessment, program planning, and evaluation process directed toward coordinating perinatal care and reducing infant mortality. The infant mortality review will include not only traditional case reviews and medical audits, but also data regarding public policies and assistance programs, the accessibility of services, cultural beliefs, and personal knowledge and motivation.

Hepatitis B Screening Access for Southeast Asians
Asian American Health Forum
116 New Montgomery Street, Suite 531
San Francisco, CA 94105
(415) 541-0866

Genetics
MCJ-061008
10/01/88–09/30/91
Project Director(s):
Sandy Tong

Although the U.S. Public Health Service provides for hepatitis B surface antigen screening for pregnant women who are refugees, there is concern among many providers of care to the Asian American community that those eligible for these programs are not aware of or do not have access to the facilities that provide the appropriate care. In addition to the accessibility problem, the large majority of Southeast Asians must also deal with linguistic/cultural, structural, educational, and financial barriers which prevent them from receiving appropriate care. This project hopes to address these and other issues facing this population. All of the sites participating in this project were chosen for their experience and sensitivity in addressing the special needs of this community. The project's goal is to increase access to hepatitis B screening and immunization for Southeast Asian pregnant women and their newborns.

Laboratory Workup of Jaundiced Newborns: A Reevaluation
University of California at San Francisco
400 Parnassus Avenue
A-205
Box 0374
San Francisco, CA 94143-0374
(415) 597-9194

Research
MCJ-060573
11/01/88–10/31/90
Project Director(s):
Thomas B. Newman, M.D.

This study seeks to evaluate the validity of the standard textbook recommendations for the clinical laboratory approach to the diagnosis of jaundice in newborn infants. Since standards of care are based on traditional recommendations, the study proposes to look at the specificity, sensitivity, and positive predictive value of each of the routine laboratory tests recommended for the evaluation of jaundiced infants.

Infant Mortality in Hartford, Connecticut: A Community-Centered Review
Hispanic Health Council
96 Cedar Street, Suite 3A
Hartford, CT 06106
(203) 527-0856

MCHIP
MCJ-096011
10/01/88–09/30/91
Project Director(s):
Georgine Burke, Ph.D.

This project will study fetal and neonatal deaths occurring among the 1989 birth cohort of residents of the city of Hartford. The Hartford Infant Mortality Review will seek to: (1) Identify factors contributing to fetal and neonatal mortality which can be prevented by changes in prenatal and perinatal behaviors and in policies and programs; (2) develop policy recommendations to reduce these problems; and (3) initiate efforts to implement the recommended changes. Preliminary conclusions, based on review of specific sets of data, will be presented to an expert health panel. The project will serve as a model for community-based review of infant mortality which can be replicated in other urban areas of the State.

National Infant Mortality Review Project
American College of Obstetricians and Gynecologists
409 12th Street, S.W.
Washington, DC 20024-2188
(202) 638-5577

MCHIP
MCJ-117013
06/01/90–05/31/93
Project Director(s):
Louise M. Wulff, Sc.D.

The goal of this project is to develop and implement a national program of perinatal and infant mortality review. A National Perinatal and Infant Mortality Review Committee will be established, composed of the major medical specialties and other health professions which can effect changes relating to infant mortality. This committee will have the responsibility of overseeing: (1) The development of a clearinghouse of current activities and literature in perinatal and infant mortality review; (2) the provision of guidelines for the implementation of perinatal and infant review activities; (3) the development of feedback loops and professional education plans for the professional groups involved, community agencies, and local, State, and national policymakers; and (4) the development of local and State perinatal and infant mortality review committees.

REACH–Futures
University of Illinois at Chicago
Maternal–Child Health Nursing
1740 West Taylor Street
Suite 1500, M/C 805
Chicago, IL 60612
(312) 996-4125

MCHIP
MCJ-178507
10/01/89–09/30/94
Project Director(s):
Cynthia Barnes-Boyd, Ph.D., M.S.N., R.N.

REACH–Futures is a 5-year innovative service project designed to prevent infant morbidity and mortality in a low-income, inner-city community. Using trained community residents supervised by a maternal-child nurse, home visits will be provided to pregnant women and mothers with infants to promote and maintain health. During the project, the health trained residents will encourage community awareness of health promotion through participation in community activities and development of peer support groups. Evaluation will include comparisons of the health outcomes of infants served by previous projects.

Infant Mortality Case Review
Indiana State Board of Health
Bureau of Family Health Services
1330 West Michigan Street
Indianapolis, IN 46206
(317) 633-0844

MCHIP
MCJ-186028
10/01/89–09/30/91
Project Director(s):
Nancy Jewell

Under this program, the Infant Mortality Review Committee, composed of professionals from multiple disciplines, will study fetal and infant deaths in Marion County, Indiana. Project efforts will focus on two primary goals: (1) To reduce infant mortality and low birthweight rates in Marion County; and (2) to demonstrate a community-based multidisciplinary review model that identifies multiple factors which contribute to fetal, neonatal, and postneonatal mortality in high-risk areas and serves as a working model for other communities.

Neonatal Nutrition Training Program
Indiana University
620 Union Drive, Room 618
Indianapolis, IN 46202-5167
(317) 274-9912

Training
MCJ-009132
10/01/89–09/30/93
Project Director(s):
Karyl A. Rickard, R.D., Ph.D.

The Neonatal Nutrition Training Program provides: (1) A biennial high-risk infant and neonatal nutrition course of national scope for physicians, dietitians/nutritionists, and nurses; (2) annual 4-month clinical fellowships in neonatal-pediatric nutrition for three dietitians/nutritionists; and (3) annual 1-week clinical update practicums for eight dietitians in intensive care nurseries or nutritionists responsible for the followup care of neonates in the community. The intense education programs for dietitians/nutritionists provide didactic information via medical-nutritional lectures, interdisciplinary seminars, and patient care rounds; and guided clinical experiences in managing high-risk infants.

Intensive Course in Pediatric Nutrition
University of Iowa
College of Medicine
Department of Pediatrics
Iowa City, IA 52242
(319) 356-2832

Training
MCJ-000256
07/01/88–06/30/93
Project Director(s):
Samuel J. Fomon, M.D.

A week-long course in pediatric nutrition is presented twice weekly by pediatricians, dietitians, nutritionists, nurses and other health professionals at the University of Iowa. Individuals who attend the course are primarily dietitians and nutritionists working in community health settings; however, hospital-based health professionals, including physicians and nurses, also attend. In plenary and small-group sessions, topics of current interest in pediatric nutrition are reviewed, and, when warranted on the basis of available evidence, specific recommendations for nutritional management are presented. A packet of presentation outlines, reproductions of visual aids, and literature references is revised and updated for each course, and a general reading list is provided.

Infant Mortality Review
Kansas City, Kansas–Wyandotte County
Health Department
619 Ann
Kansas City, KS 66101
(913) 321-4803

MCHIP
MCJ-206038
10/01/90–09/30/92
Project Director(s):
Darrel D. Newkirk, M.D., M.P.H.

The goal of this project is to design a process for the identification and examination of the factors contributing to fetal and infant deaths through systematic evaluation of individual cases. A community-based Infant Mortality Review (IMR) Team and Case Review Work Group (CRWG) will be formed. A systematic approach with standardized abstracting forms and a common methodology for examining factors contributing to fetal and infant deaths will be developed. The data collection process will be implemented, and recommendations will be developed by the IMR team based on the findings.

Home Intervention with Infants with Failure to Thrive
University of Maryland School of Medicine
Department of Pediatrics
700 West Lombard Street
Baltimore, MD 21201
(301) 328-6133 or 328-5289

Research
MCJ-240568
04/01/88–03/31/93
Project Director(s):
Maureen M. Black, Ph.D.

The primary goal of this 5-year project is to measure the impact of a home intervention program on the growth and development of infants with failure to thrive (FTT). It is hypothesized that, among families with a child with FTT, those families who receive home-based, ecologically oriented intervention for 1 year will show improvements in their child's growth, health, cognitive development, emotional development, motor development, and behavior, as mediated by more responsive parent-infant interactions and more effective caregiving behaviors.

Investing in Our Children
Maryland State Department of Health
and Mental Hygiene
201 West Preston Street
Baltimore, MD 21201
(301) 225-6614

MCHIP
MCJ-247019
10/01/90–09/30/91
Project Director(s):
Yvette McEachern

The Investing in Our Children project will be conducted in two phases. The first phase (year 1) will consist of project start-up and preliminary activities. The second phase (years 2–5) will encompass project implementation and modification. Evaluation activities will be ongoing. The project goal is to reduce the incidence of infant mortality and low birthweight in selected communities in Baltimore City (phase 1) and Prince George's County (phase 2).

Case-by-Case: Boston's Infant Mortality Review Project
Trustees of Health and Hospitals of the
City of Boston
1010 Massachusetts Avenue
Boston, MA 02118
(617) 524-5264

MCHIP
MCJ-256026
10/01/89–09/30/91
Project Director(s):
Alonzo Plough, Ph.D., M.P.H.

The goal of the Case-by-Case Infant Mortality Review Project is twofold: (1) To develop, implement, and evaluate a process to review infant deaths in order to identify contributing factors which are preventable or amenable to change; and (2) to develop, implement, and evaluate a process whereby infant mortality review information can be translated into successful, action-oriented strategies aimed at eliminating racial disparities in infant mortality and other health risks and outcomes in Boston. Over the 2-year grant period, the project will review a random sample of 80 infant deaths occurring to Boston residents between July 1, 1989, and June 30, 1991. Aggregated review information will be translated into action-oriented recommendations and strategies for reducing infant deaths in Boston.

Massachusetts Infant Mortality Action Strategy
Massachusetts Health Research Institute
101 Tremont Street, Suite 600
Boston, MA 02108
(617) 727-6436 or 727-2735

MCHIP
MCJ-256039
10/01/90–09/30/92
Project Director(s):
Marlene Anderka, M.P.H.
Bruce Cohen, Ph.D., M.P.H.

The goals of the infant mortality review process to be developed by the Massachusetts Infant Mortality Action Strategy are to: (1) Develop a model for the rapid investigation of infant mortality in communities or population subgroups with excessive IMRs; (2) pilot the model in an area with an excessive IMR; (3) develop local action plans with the pilot community which identify specific program and policy actions to reduce infant mortality and which can be implemented at the State and local levels; and (4) produce materials which can be used by other state health departments.

First Step Infant Health Project
Omaha Housing Authority
540 South 27th
Omaha, NE 68105
(402) 444-7715

MCHIP
MCJ-316041
10/01/90–09/30/93
Project Director(s):
Maureen A. Fitzgerald, J.D.

The goals of this project are to: (1) Make a substantial reduction in the rates of infant mortality and low birthweight among families who reside in Omaha's public housing developments; (2) improve the quality of continuing health care for children in these developments; and (3) assist families in the drive to self-sufficiency by improving levels of training and expanding household management skills. The focus of the project will be the development of a one-stop shopping center for prenatal services at a single, convenient location in the North Omaha neighborhood.

Infant Mortality Review, Mott Haven, New York City
New York City Department of Health
Bureau of Maternity Services and Family Planning
280 Broadway, Room 303
New York, NY 10007
(212) 566-5347

MCHIP
MCJ-366012
10/01/88–09/30/91
Project Director(s):
Karla Damus, Ph.D.

This project seeks to implement a comprehensive infant mortality review process in the Mott Haven community, using a systems approach. Multiple data sources will be used to determine the factors associated with each fetal and infant death occurring to Mott Haven residents between January 1989 and September 1990. Approximately 140 cases will be reviewed during the 2-year project period. Data for an additional 168 control infants will be reviewed as part of a matched multiple control design study for a subset of fetal and infant deaths occurring between July 1989 and September 1990 to residents of Mott Haven delivering at Lincoln Hospital. Based on the infant mortality review findings, specific recommendations for strategies and interventions will be made.

Primary Preventive Care for Children in Substance-Abusing Families
Children's Hospital of Buffalo
219 Bryant Street
Buffalo, NY 14222
(716) 878-7908

MCHIP
MCJ-368209
10/01/89–09/30/94
Project Director(s):
Maureen Montgomery, M.D.

This project is designed to address the high-risk health status of infants exposed to substance abuse in the prenatal period and the frequent inability of substance-abusing women to parent and nurture their children. A pediatrician and nurse practitioner will provide primary care to these women and their infants, which will include parent education classes, well-child visits, and periodic neurodevelopmental and behavioral assessments. In addition, the program will provide intensive, home-based support through weekly visits by culturally similar "resource mothers" in an effort to eliminate the need for foster care placement.

Prediction of Outcome of Early Intervention in Failure to Thrive
Case Western Reserve University
Metro Health Medical Center
3395 Scranton Road
Cleveland, OH 44109
(216) 459-3745

Research
MCJ-390557
11/01/87–10/31/90
Project Director(s):
Dennis D. Drotar, Ph.D.

This project addresses the need for controlled studies of the psychological and health outcomes of those infants with failure to thrive (FTT) who have received early intervention, in order to assess early developmental delays and family influences which mediate intervention effects. The family, the environment, and the psychological and physical health outcomes of children originally diagnosed with FTT during the first year of life will be compared to a sample of physically healthy infants who are matched by child and family characteristics.

Psychological Sequelae of Bronchopulmonary Dysplasia and Very Low Birthweight
Case Western Reserve University
Rainbow Babies and Children's Hospital
2101 Adelbert Road
Room 373
Cleveland, OH 44106
(216) 844-3230

Research
MCJ-390592
10/01/89–09/30/92
Project Director(s):
Lynn T. Singer, Ph.D.

This study is a longitudinal, prospective investigation of the medical, social, and developmental correlates of chronic lung disease during the first 2 years of life. Data will be evaluated descriptively as well as through a series of multivariate analyses of variance with repeated measures to describe the functioning of infants with bronchopulmonary dysplasia (BPD) and to understand the developmental interferences imposed by BPD early in life. The proposed research will provide practical information about family and developmental stresses related to lung disease which might be amenable to intervention early in life and will also contribute to our theoretical understanding of the role of chronic illness in child development.

Oregon SIDS Prevention Project
Oregon Department of Human Resources
Health Division
Maternal and Child Health
P.O. Box 231
Portland, OR 97207
(503) 229-6382

MCHIP
MCJ-416030
10/01/89–09/30/92
Project Director(s):
Grant Higginson, M.D.

This project aims to demonstrate that Oregon's postneonatal mortality rate can be improved by identifying infants at higher risk for sudden infant death syndrome (SIDS) and providing intensive nursing intervention to prevent potential SIDS deaths. The region targeted for intervention is Marion County, where 10 percent of the State's SIDS cases occur. Under this program, local public health nurses will screen 340 high-risk infants annually for SIDS. The project outcome objective is to reduce the SIDS rate for Marion County to the State average or below by 1992.

Long-Term Outcomes of Very Low Birthweight Infants
Children's Hospital of Philadelphia
Division of Neonatology
34th Street and Civic Center Boulevard
Philadelphia, PA 19104
(215) 590-3609

Research
Interagency Agreement
with NICHD
06/15/85–06/30/91
Project Director(s):
George Peckham, M.D.
Marie McCormick, M.D.

The purpose of this study of the long-term outcomes of very low birthweight (VLBW) infants is to provide longitudinal information on outcomes of infants treated with modern intensive care in multiple settings as these children reach school age. This is an effort to better characterize the health and developmental status of these infants at early school age.

Behavioral Intervention with IUGR Infants
Women and Infants Hospital of Rhode Island
101 Dudley Street
Providence, RI 02905-2401
(401) 274-1100, ext. 1232

Research
MCJ-440569
07/01/88–06/30/91
Project Director(s):
Cynthia Garcia Coll, Ph.D.

The purpose of this 3-year longitudinal intervention study is to: (1) Examine the effectiveness of a parent/infant-based behavioral intervention during the neonatal period to prevent or ameliorate the negative consequences of intrauterine growth retardation (IUGR) on maternal-child sensitivity and infant physical growth, caloric intake, cognitive development, and language development; and (2) examine the mediating effects of cultural context and risk status on the effectiveness of intervention with IUGR infants. The planned intervention is expected to affect outcomes directly by improving caloric intake and indirectly by improving mother-infant interactions.

Fetal and Infant Mortality Review:
Understanding Our Problem
South Carolina Department of Health
and Environmental Control
Bureau of Maternal and Child Health
2600 Bull Street
Columbia, SC 29201
(803) 737-4180 or 737-4190

MCHIP
MCJ-456010
10/01/88–09/30/91
Project Director(s):
Cathy Melvin Efird, Ph.D.
Ann Donohoe Gates, M.S.P.H.

The goal of this project is to improve the survival rate of infants in South Carolina by analyzing health care financing systems and service delivery problems in an effort to identify those factors which contribute to infant mortality both locally and statewide. Program activities include completing the *Fetal and Infant Death Review Manual for South Carolina*; developing a statewide technical support network; and establishing a mechanism for implementing recommendations made by local area review teams at both the State and local levels.

Neonatal Nutrition Training
Medical University of South Carolina
Department of Pediatrics
Children's Hospital
171 Ashley Avenue
Charleston, SC 29425
(803) 792-2606

Training
MCJ-009117
07/01/88–06/30/93
Project Director(s):
William B. Pittard III, M.D.

The purpose of this neonatal nutrition training center is to provide update education to health care providers of high-risk infants and to provide training to registered dietitians to develop expertise in the nutrition care of high-risk infants. By this specialized training, health care providers can alter their nutrition management of high-risk infants and perhaps decrease infant morbidity and mortality. The annual conference provides training to a multidisciplinary group, whereas the 1-week practicums and 3-month neonatal nutrition fellowships provide indepth training to nutritionists.

Perinatal Outcome Study of the Meharry Cohort
Meharry Medical College
1005 Dr. D. B. Todd, Jr. Boulevard
Nashville, TN 37208
(615) 327-6794

Research
MCJ-477008
01/01/89–12/31/92
Project Director(s):
Henry Foster, Jr., M.D.

The specific aim of this study is to demonstrate that in a black population with sustained, intergenerational, high socioeconomic status (SES) and equal risk factors, the birthweight distribution and other reproductive outcomes are the same as those which exist for whites in this country. We will examine comparable data for blacks and whites of relatively high sustained SES, for second and third generation black outcome effects. The primary dependent variables will be birthweight, but other perinatal outcome dependent variables will be considered. Independent variables will consist of factors relating to education, income, social status, and nonobstetric health entities.

Project First Step
Parkland Memorial Hospital
5201 Harry Hines Boulevard
Dallas, TX 75235
(214) 920-7910

MCHIP
MCJ-488621
10/01/90–09/30/95
Project Director(s):
Gordon Green, M.D., M.P.H.

This project will focus its activities on a major goal to reduce infant mortality and morbidity in targeted areas of Dallas County by improving the health status of medically indigent low birthweight infants. The project will accomplish this goal by: (1) Establishing geographically targeted low birthweight clinics; (2) establishing a referral network with hospitals delivering low birthweight infants and existing programs; (3) developing a case management system of family-centered, culturally sensitive, comprehensive, coordinated care; and (4) developing baseline morbidity data in order to longitudinally track the impact of the program. Measurable outcome objectives specifically related to morbidity include reducing infant mortality in target areas, improving immunization rates, increasing enrollment in WIC, screening and treating iron deficiency anemia, screening for child abuse/neglect, reducing hospitalizations, and reducing emergency room visits.

Infant Mortality Review to Decrease Perinatal Mortality
Utah Department of Health
Division of Family Health Services
P.O. Box 16650
288 North 1460 West
Salt Lake City, UT 84116
(801) 584-8237

MCHIP
MCJ-496013
10/01/88–06/30/91
Project Director(s):
Thomas J. Wells, M.D., M.P.H.

This project will conduct perinatal case reviews, to include calculation of birthweight-specific perinatal mortality tables for three time periods, in two urban and two rural high perinatal mortality sites. At least one factor contributing to perinatal mortality will be identified at each site and targeted for action through the State Perinatal Health Care Plan, the State Title V agency, and/or the local health department. Two years after project completion, programs addressing contributing factors and a quality assurance plan of the State Perinatal Health Care Plan will be in place.

Infant Health

Newborn Screening and/or Followup

Alabama Statewide Newborn Hemoglobinopathies Screening and Followup
Alabama Department of Public Health
434 Monroe Street
Montgomery, AL 36130-1701
(205) 242-5760

Genetics
MCJ-011003
10/01/90–09/30/92
Project Director(s):
Lloyd M. Hofer, M.D.

The goals of this project are to: (1) Screen and identify all newborns at birth, and refer sickle cell disease patients for counseling and followup within 4 weeks of diagnosis; (2) track hospital utilization by patients with sickle cell disease; (3) determine immunization status of children with sickle cell disease with respect to Haemophilus b (Hib) vaccine and Pneumovax; (4) promote compliance with prophylactic penicillin per recommendation of the National Institutes of Health; (5) improve the understanding of parents concerning management of sickle cell disease; and (6) follow children identified at birth with sickle cell disease to adulthood.

Improving Outcome of Hemoglobinopathy Screening
California Public Health Foundation
2001 Addison Street, Suite 210
Berkeley, CA 94704
(415) 644-8200

Genetics
MCJ-061013
10/01/90–09/30/92
Project Director(s):
George C. Cunningham, M.D.

This project has established goals to: (1) Screen 99 percent of the live births for hemoglobinopathies; (2) document that a definitive diagnosis has been made for 99 percent of the presumptive positives for significant hemoglobinopathies detected by the screening program; (3) develop minimum standards for treatment and monitor compliance; (4) document that a definitive diagnosis has been made for 99 percent of the results with variants or hemoglobin combinations of unknown significance detected by the screening program; (5) establish a registry of significant hemoglobin disorders and collect periodic information on outcome; and (6) collect and report epidemiological data on the birth prevalence of hemoglobins by race and geographic distribution.

Expanded Treatment and Followup Care System for Infants with Significant Sickle Cell Disease
Connecticut Department of Health Services
Bureau of Community Health
Family and Reproductive Health Division
150 Washington Street
Hartford, CT 06106
(203) 566-5601

Genetics
MCJ-091005
10/01/90–09/30/92
Project Director(s):
Jadwiga Goclowski, Ph.D., R.N.

The overall goal of the project is to strengthen and expand treatment services for families with children who have sickle cell disease. Specifically, the project will ensure (1) diagnostic treatment and followup care of all newborns identified with significant sickle cell disease in order to decrease morbidity and mortality in these high-risk infants; and (2) education, information, and counseling to all families affected with significant sickle cell disease.

Newborn Sickle Cell Followup
Howard University
Center for Sickle Cell Disease
2121 Georgia Avenue, N.W.
Washington, DC 20059
(202) 636-7930

Genetics
MCJ-111009
10/01/90–09/30/92
Project Director(s):
Oswaldo Castro, M.D.

The primary goal of this project is to ensure comprehensive followup and treatment of identified infants with a sickle cell disorder. Additional goals are to: (1) Inform health care providers about the followup program in the District of Columbia; (2) maintain and improve an established computerized recording system on all activities related to the followup program for evaluation and monitoring of program effectiveness; (3) maintain an effective mechanism for referrals; (4) increase the effective utilization of health care services by affected infants and their families; (5) ensure that infants are receiving prophylactic penicillin; and (6) provide an effective educational program on sickle cell disease and other hemoglobinopathies.

Multichannel Analyzer for Automated Newborn Screening
Tulane University Medical Center
Human Genetics Program
1430 Tulane Avenue
New Orleans, LA 70112
(504) 588-5229

Genetics
MCJ-221005
10/01/90–09/30/92
Project Director(s):
Emmanuel Shapira, M.D., Ph.D.

The goal of this project is to develop a dual-channel analyzer for automated, quantitative newborn screening using high performance liquid chromatography (HPLC) methodology. The first channel will be used to screen for hemoglobinopathies using either anion or cation exchange chromatography. The possibility of adding screening for congenital hypothyroidism on this channel will be evaluated at a later phase of the project. The second channel will screen for some of the inborn errors of amino acid metabolism.

Statewide Ongoing Comprehensive Followup Care of Newborns with Hemoglobinopathies
Maryland Department of Health and Mental Hygiene
201 West Preston Street
Baltimore, MD 21201
(301) 225-6731

Genetics
MCJ-241007
10/01/90–09/30/92
Project Director(s):
Susan Panny, M.D.
Judi Greenblatt, R.N., M.P.H.

Maryland currently has a newborn screening and comprehensive followup care system. This project seeks to improve this system by making it more centrally coordinated, introducing improvements in medical management as they become available, and strengthening the education components. The goal of this project is to improve and ensure the continuing provision of high quality, cost-effective, and comprehensive followup health care services for newborns with hemoglobin disorders and their families.

Mississippi Hemoglobinopathy Treatment, Education, and Followup Project
Mississippi State Department of Health
Genetic Screening Program
P.O. Box 1700
Jackson, MS 39215-1700
(601) 960-7619

Genetics
MCJ-281004
10/01/90–09/30/92
Project Director(s):
Daniel R. Bender

The purpose of this project is to reduce mortality and morbidity due to sickle cell disease and other hemoglobinopathies. Evidence indicates that the detection and treatment of hemoglobinopathies, especially hemoglobin SS, in the newborn period will reduce childhood mortality due to this disease. Therefore, the Mississippi State Department of Health intends to develop a treatment, followup, and education program to enhance the services provided through the screening program already in existence.

DNA-Based Screening for Alpha-1-Antitrypsin Deficiency in the Newborn Population
New York State Department of Health and Health Research, Inc.
Wadsworth Center for Laboratories and Research
Laboratory of Human Genetics
Empire State Plaza, P.O. Box 509
Albany, NY 12209-0509
(518) 474-6713 or 474-1516

Genetics
MCJ-361010
10/01/90–09/30/92
Project Director(s):
Patricia D. Murphy, Ph.D.

This project is being undertaken to improve the health of infants born in New York State, a goal to be shared with the entire newborn screening program. Since 1 in 10 persons in the general population is expected to possess a risk factor for alpha-1-antitrypsin deficiency, the potential impact is enormous. Through early identification, appropriate counseling, and/or treatment, the deleterious effects of this condition may be minimized.

Newborn Screening Followup and Comprehensive Sickle Cell Services
State University of New York Health Science Center of Brooklyn
Children's Medical Center
450 Clarkson Avenue
Brooklyn, NY 11203
(718) 735-3371 or 270-1178

Genetics
MCJ-361009
10/01/90–09/30/92
Project Director(s):
Scott T. Miller, M.D.

The goal of this project is to continue an effective followup program for infants identified as having sickle cell disease by newborn screening. Infants must be rapidly identified by a competent screening laboratory, and that information must be efficiently conveyed to a program dedicated to bringing affected infants to appropriate medical care. Only with effective, prompt, and sustained followup efforts can the goal of newborn screening for sickle cell disease be realized—a reduction in infant morbidity and mortality due to early complications of the disorder.

National Screening Center for PKU and Molybdenum Cofactor Variants
Western Pennsylvania Hospital
4800 Friendship Avenue
Pittsburgh, PA 15224
(412) 578-7320

Training
MCJ-009086
07/01/88–06/30/93
Project Director(s):
Edwin W. Naylor, Ph.D., M.P.H.

The purpose of this project is to maintain a national screening center for phenylketonuria (PKU) cofactor variants and molybdenopterin cofactor defects. In addition, the project will provide training to postdoctoral fellows and graduate students in human biochemical genetics with a special focus on pteridine biochemistry, neonatal screening, analytical biochemistry, and molecular genetics; and will provide education to physicians, residents, medical students, and the general public regarding the nature of PKU and molybdenum cofactor defects.

Treatment and Followup Care for Infants and Children with Sickle Cell and Related Disorders
University of Puerto Rico Medical Sciences Campus
School of Medicine
Department of Pediatrics
G.P.O. Box 5067
San Juan, PR 00936
(809) 754-7410

Genetics
MCJ-431004
10/01/90–09/30/92
Project Director(s):
Pedro J. Santiago-Borrero, M.D.

The goals of this project are to: (1) Improve the accessibility and the quality of health care provided to infants and children who, upon neonatal screening, are found to have sickle cell disease or other related disorders; and (2) prevent early mortality and reduce morbidity and complications of the disease.

Followup Program to Improve Outcomes for Infants with Sickle Cell Disease
Tennessee Department of Health and Environment
Maternal and Child Health
525 Cordell Hull Building
Nashville, TN 37247-4701
(615) 741-7335

Genetics
MCJ-471005
10/01/90–09/30/92
Project Director(s):
Susan Erickson, R.N., M.P.H.

The goal of this project is to prevent mortality and minimize morbidity among infants with sickle cell disease. Specific objectives are to ensure that all infants with disease identified by the program have confirmatory diagnosis; medical care, evaluation, and followup by a pediatric hematologist; case management services; and a comprehensive parent/caregiver education program provided in a timely manner according to program guidelines.

Newborn Screening: Applications of Molecular Genetics Technology
Baylor College of Medicine
Institute for Molecular Genetics
1 Baylor Plaza, S-921
Houston, TX 77030
(713) 798-5820

Genetics
MCJ-481007
10/01/90–09/30/92
Project Director(s):
Edward R.B. McCabe, M.D., Ph.D.

This project will utilize state-of-the-art molecular genetic technology to improve the sensitivity and specificity of newborn screening bacterial inhibition assays (BIAs). The specific objective of this project is to demonstrate the efficacy of improved microorganisms for newborn screening BIAs for maple syrup urine disease (MSUD), phenylketonuria (PKU), and other inborn errors of metabolism. This project will utilize auxotrophic bacteria which will give a color change in the appropriate growth media in order to enhance imaging using automated plate readers, and will be engineered to facilitate quality assurance and quality control.

Newborn Screening for Hemoglobinopathies
Texas Department of Health
Bureau of Maternal and Child Health
1100 West 49th Street
Austin, TX 78756-3199
(512) 458-7700

Genetics
MCJ-481006
10/01/90–09/30/91
Project Director(s):
Linda Prentice, M.D.

The major goals of the Texas Department of Health's newborn screening program are to: (1) Decrease the morbidity and mortality of infants and children with sickle cell disease; (2) increase general awareness and understanding of sickle cell disease among medical, professional, and lay persons in Texas; and (3) ensure that each newborn with a reported hemoglobinopathy is linked with appropriate medical followup services.

Infant Health

Breastfeeding and Infant Nutrition

Arkansas Best Start Breastfeeding Promotion Project
Arkansas Department of Health
Division of Infant and Child Health
4815 West Markham Street
Little Rock, AR 72205-3867
(501) 661-2807

MCHIP
MCJ-056036
10/01/90–09/30/93
Project Director(s):
Linda S. Black, M.D.

The goal of this project is to increase the incidence and duration of breastfeeding throughout the State, but particularly in the Special Supplemental Food Program for Women, Infants and Children (WIC) and MCH clients in the Pulaski Central Health Unit of Pulaski County (Little Rock). Activities include developing a breastfeeding promotion center, implementing a comprehensive breastfeeding promotion system for low-income women in the target area, and developing a data collection system for monitoring breastfeeding rates for the State.

Colorado Breastfeeding Promotion Project
Colorado Department of Health
Family and Community Health Services
4210 East 11th Avenue
Denver, CO 80220
(303) 331-8359

MCHIP
MCJ-086034
10/01/90–09/30/93
Project Director(s):
Daniel J. Gossert
Joan McGill

The goal of this project is to increase the initiation and duration of breastfeeding by 1994, especially among adolescent, minority, and low-income women, by enhancing the public image of breastfeeding and by removing barriers which cause women to discontinue breastfeeding prematurely. Activities include developing practice standard guidelines; conducting a hospital survey; providing training sessions for health care professionals, day care providers, community college instructors, and human resource directors of public and private companies; planning a public information campaign; distributing educational materials; and implementing a high school curriculum.

Conference on Formula Preparation for Infants in Health Care Facilities
American Dietetic Association
Council on Practice/Pediatric Nutrition Practice Group
216 West Jackson Boulevard, Suite 800
Chicago, IL 60606-6995
(312) 899-4814

MCHIP
MCJ-177009
02/01/89–09/30/91
Project Director(s):
Lorraine Partlow

The goal of this project is to develop and publish a document entitled *Formula Preparation for Infants in Health Care Facilities*, which is based on the most recent scientific research. To reach this goal, the project will: (1) Produce technical papers concerning issues relating to infant formula preparations in health care facilities; (2) develop written guidelines based on these papers; (3) obtain endorsement of the guidelines from professional organizations; and (4) publish and disseminate a document based on the papers and guidelines.

Best Start-Kentucky
Lexington-Fayette County Health Department
Nutrition and Health Education
650 Newtown Pike
Lexington, KY 40508
(606) 288-2309

MCHIP
MCJ-216035
10/01/90-09/30/93
Project Director(s):
Lora Gray, M.S., R.D.

The goal of this project is to increase the incidence and duration of breastfeeding among economically disadvantaged women living in Kentucky. It will specifically target women who receive perinatal services from the Kentucky State Division of Maternal and Child Health Services Prenatal Program and the Special Supplemental Food Program for Women, Infants and Children (WIC). Best Start-Kentucky will benefit these women by integrating consistent breastfeeding information into prenatal programs; building community awareness and approval of breastfeeding; and promoting supportive policies in hospitals, industries, and communities.

Feeding Method and Fat Tolerance in Very Low Birthweight Neonates
Wayne State University
Mott Center for Human Growth and Development
275 East Hancock
Detroit, MI 48201
(313) 745-7231

Research
MCJ-260596
10/01/90-09/30/93
Project Director(s):
Yves W. Brans, M.D.

Special formulas that have a high caloric density (80 kcal/dl) while being isosmolal are very popular for providing very low birthweight neonates with adequate nutrition. The formulas are given by gavage feeding either in a continuous drip or in intermittent boluses. No information is available on the relative merits and dangers of these two methods of gavage feeding and on the possible disturbances of plasma lipid patterns by formulas containing high proportions of medium-chain triglycerides. We propose to allocate 90 very low birthweight neonates (750-1,499 grams) randomly to continuous gastric drip or intermittent bolus feeding as soon as their clinical condition allows enteral feedings. We will monitor intestinal tolerance to the formula, growth (by anthropometric measurements and estimation of body composition by total body electrical conductivity), rate of progression of feedings, and macronutrient balance studies.

Study Group on Human Lactation and Breastfeeding
University of Rochester
Department of Pediatrics
601 Elmwood Avenue
P.O. Box 777
Rochester, NY 14642
(716) 275-0088 or 275-4354

Training
MCJ-009104
10/01/87-03/30/91
Project Director(s):
Ruth A. Lawrence, M.D.

This project is designed to support the efforts of the Maternal and Child Health Bureau (MCHB) to ensure that reliable information on matters relating to human lactation and breastfeeding is readily available to professionals both in State Title V programs and in the community at large. The project's regularly updated computer system includes an extensive bibliography and current information on drugs in breast milk, breast anatomy, conditions of the mother and infant and whether they impinge on breastfeeding, lactation management, failure to thrive, milk banking, special problems of the premature infant, nutritional requirements for lactating women, psychological bonding, and community interactions which increase the rate of breastfeeding.

Breastfeeding Promotion
West Virginia Department of Health
and Human Resources
Maternal and Child Health
1411 Virginia Street, East
Charleston, WV 25301
(304) 348-5388

MCHIP
MCJ-546037
10/01/90–09/30/93
Project Director(s):
Helen Fisher

The goals of this project are to: Increase public acceptance of breastfeeding; make more women aware of the emotional and health benefits of breastfeeding for the mother and infant; encourage family members and friends to support the decision of the breastfeeding mother; establish breastfeeding policy statements in both hospitals and State public health programs; and train health professionals to promote and support breastfeeding, especially among low-income women. The overall plan is to incorporate breastfeeding promotion in health professional training, prenatal education, postpartum education and support, and policy development.

Lactation Certification Training for Wisconsin Health Professionals
LaCrosse County Health Department
300 North Fourth Street
LaCrosse, WI 54601
(608) 785-9865

MCHIP
MCJ-556043
10/01/90–09/30/93
Project Director(s):
Linda Lee

The LaCrosse County Health Department, in conjunction with the State of Wisconsin Special Supplemental Food Program for Women, Infants and Children (WIC) program, will: (1) Develop a network of certified breastfeeding educators throughout the State over a 3-year period; (2) provide scholarships each year for 35 people to participate in the University of California at Los Angeles Lactation Educator Training Program to be held in Wisconsin; (3) collect data from each scholarship recipient before and after enrollment in the Lactation Educator Program to determine how concepts learned facilitated changes in agency/hospital policies and procedures; and (4) increase by 10 percent the incidence and duration of breastfeeding among the Wisconsin WIC population.

Infant Health

Parenting

Partnership
Health Start, Inc.
640 Jackson Street
St. Paul, MN 55101
(612) 321-3673

MCHIP
MCJ-278516
10/01/90–09/30/95
Project Director(s):
Dorothy A. Hyde

The goals of the project are to (1) facilitate the development of secure mother-infant attachments among Health Start clients participating in the project, and (2) minimize the number of closely spaced pregnancies in our target population. Measurable objectives are to (l) reduce the incidence of child abuse in the target population in the first 2 years of life to less than the 3.5 percent of the rate currently seen in Health Start clients, and (2) decrease to less than 50 percent the number of repeat pregnancies within 18 months of delivery among targeted women.

Determinants of Adverse Outcome Among Toddlers of Adolescent Mothers
Research Foundation for Mental Hygiene, Inc.
New York State Psychiatric Institute
722 West 168th Street
New York, NY 10032
(212) 960-2298

Research
MCJ-360540
11/01/86–10/31/91
Project Director(s):
Gail A. Wasserman, Ph.D.
Virginia Rauh, Sc.D.

This project extends our present work in understanding the sources of psychosocial risk to adolescent mothers and their infants. This project has four specific aims: (1) To extend the current longitudinal study of mothers and infants to include a third year of followup at age 3; (2) to more fully explore the role of extended family and caregiving environments, especially conflict and disorganization; (3) to examine the impact upon early development of psychiatric diagnosis of depressive illness in mothers and alternate caregivers; and (4) to expand our assessment of early developmental competence of children to include measures of emotional/behavioral problems.

Study of Home Visitation for Mothers and Children
University of Rochester Medical Center
Department of Pediatrics
601 Elmwood Avenue
Rochester, NY 14642
(716) 275-3738

Research
MCJ-360579
09/30/88–08/31/93
Project Director(s):
David L. Olds, Ph.D.

This study seeks to determine the effectiveness of prenatal and postpartum nurse home visitation services as a means of enhancing the life course development, social resources, and caregiving skills of parents living in a high-risk urban environment, and to ascertain whether these services can prevent a wide range of health and developmental problems in their children. It is hypothesized that the home visitation program promotes the health and well-being of the participating women and children, and that the effectiveness of the program is greater for women and children at greater risk for the particular problems under consideration. It is also hypothesized that the financial investment in prenatal and postpartum nurse home visitation will be recovered by preventing subsequent costs associated with maternal and child dysfunctions.

Mothers Offering Mothers Support
Surry County Health Department
118 Hamby Road
P.O. Box 1062
Dobson, NC 27017
(919) 386-9408

MCHIP
MCJ-373713
10/01/88–09/30/91
Project Director(s):
Marjorie S. Chilton

The goals of this project include improving the perinatal outcome of participating women, improving parenting skills, promoting positive parent-child relationships, and improving mothers' self-esteem and self-sufficiency. Project staff and volunteers provide support for adolescent mothers and mothers ages 20–25 years who are at high risk for preterm labor, depression, and child abuse and neglect. Support includes transportation to clinics, access to community resources, ongoing parenting skills training, emotional support, and the opportunity for growth through a healthy relationship with an adult.

Risk Detection Using Observations of Interaction
University of North Carolina at Chapel Hill
Department of Pediatrics
Chapel Hill, NC 27599
(919) 966-7171

Research
MCJ-370588
10/01/89–09/30/91
Project Director(s):
Julie A. Hofheimer, Ph.D.
M. I. Appelbaum, Ph.D.

This research project involves an examination of the clinical utility and psychometric properties of an observation system designed to assess mother-infant interaction from birth through the first 2 years of life. The measure was developed and field-tested at the former Clinical Infant Research Unit of the National Institute of Mental Health. The measure's purpose is to describe several critical aspects of the mother-infant relationship, especially in dyads at high risk for dysfunctional development. The project goals are to: (1) Demonstrate the clinical utility and quality of measurement in systematic observations to determine how biomedical and psychosocial characteristics of the infant, mother, and caregiving environment interact to produce varied developmental outcomes; and (2) present a refined measure for screening by practitioners in the field.

Family Growth Center Pilot Project
Allegheny General Hospital/Medical College
of Pennsylvania
Department of Pediatrics
320 East North Avenue, Sixth Floor
Pittsburgh, PA 15212
(412) 359-3160

MCHIP
MCJ-428320
10/01/90–09/30/95
Project Director(s):
Richard Solomon, M.D.

The Family Growth Center Pilot Project will pilot a model program that is designed to promote the health and development of at-risk young parents and their children using an integrated primary prevention approach. This model programming will have components that will increase social support for young parents, enhance their parenting abilities, improve the health status of both parents and children, enhance the educational status of families, and enhance neighborhood and local community growth.

Adolescent Mothering and Preschool Behavior Problems
University of Washington
Child Development and Mental Retardation Center
Mailstop WJ-10
Seattle, WA 98195
(206) 543-8453

Research
MCJ-530589
10/01/89–09/30/92
Project Director(s):
Susan J. Spieker, Ph.D.
Robert J. McMahon, Ph.D.

This study will followup 250 adolescent mother-infant pairs with known infant attachment classifications at two assessments in the preschool years. The children will be assessed for the presence of "vulnerability of protective mechanisms" in the areas of security of their current attachment to mother, their self-perceptions, social support, and language development. Mothers will be interviewed at home and will complete questionnaires to identify maternal "vulnerability and protective mechanisms" in perceptions of life stress, social support, partner relationships, and psychological distress. Data analyses will be performed to determine the ways in which interactions between risk factors and "vulnerability and protective mechanisms" influence developmental pathways toward and away from the emergence of preschool behavior problems.

Child Health

Primary Care/ Preventive Health Services

Tamaiti Malolosi Mo Se Samoa Manuia
(Nutrition and Dental Intervention Project)
American Samoa Department of Health Services
Preventive Health Services Division
P.O. Box E
Pago Pago, AS 96799
(684) 633-2697

MCHIP
MCJ-606020
10/01/89–09/30/92
Project Director(s):
Sally M. Livingston, M.P.H., R.D.

The goal of the project is to reduce to 35 percent the prevalence rate of chronic nutritional health problems among approximately 2,225 children ages 2 to 6 years in American Samoa. This will be accomplished by activities to reduce the prevalence of iron deficiency anemia, tooth decay, and obesity.

Project for Attention-Related Disorders
San Diego Unified School District
Health Services Department
2716 Marcy Avenue
San Diego, CA 92113
(619) 525-7370

MCHIP
MCJ-068906
10/01/89–09/30/94
Project Director(s):
Philip Nader, M.D.

This project will establish a school-community network to provide diagnostic and intervention services for low-income children and youth who exhibit symptoms of attention deficit disorders. The network will include pediatricians, school nurses, teachers, school administrative and support personnel, after-school care providers, community mental health and medical clinic staff, and representatives from parent advocacy groups. Professional education will include didactic sessions, written guidelines, and problem solving. Interdisciplinary collaboration will be stressed with the use of a common data base and cross-discipline training. Parent instruction will provide knowledge of the causes and implications of attention related disorders, and build skills needed to modify behavior and to facilitate academic performance and social interaction. Protocols for curriculum and classroom modifications will be developed for local and state distribution.

Healthy Start/Children's Clinic
Healthy Start Children's Clinic
507 South College Street
Fort Collins, CO 80524
(303) 484-1967

MCHIP
MCJ-088801
10/01/89–09/30/94
Project Director(s):
Thomas J. Wera, M.D.

The Healthy Start/Children's Clinic is a comprehensive, community-based program which seeks to provide access to high quality pediatric care for area children from indigent families. The Children's Clinic has outlined four major goals: (1) Provide a medical home with quality pediatric care; (2) provide care with the assistance of the medical community for clinic overflow and specialty care; (3) stimulate community interest and awareness; and (4) continue comprehensive services to families by making appropriate referrals to other agencies and/or programs.

Healthy Tomorrows for New Haven
New Haven City Department of Health
1 State Street
New Haven, CT 06510
(203) 787-6999

MCHIP
MCJ-098112
10/01/90–09/30/95
Project Director(s):
William Quinn, M.P.H.

Healthy Tomorrows for New Haven will: (1) Strengthen the long-term capacity of school health services to serve as access points and sources of continuity for appropriate health and mental health care for children; (2) facilitate a coordinated approach by the Board of Education and the city of New Haven Department of Health to meeting the health and health education needs of school children; and (3) develop two models of accessible, comprehensive care founded on partnerships between school health personnel and a health care provider—a school-linked clinic for children in one middle school located near a primary care facility, and expanded health services available to preschoolers and school-age children at an elementary school in an isolated, underserved area of the city.

Reducing the Nation's Pediatric Intensive Care Mortality
Children's Hospital National Medical Center
111 Michigan Avenue, N.W.
Washington, DC 20010
(202) 745-2131

Research
MCJ-110584
04/01/89–03/31/93
Project Director(s):
Murray M. Pollack, M.D.

Recent data indicate that the quality of pediatric intensive care is not uniform, resulting in the unnecessary deaths of numerous infants and children each year. This proposal will investigate four primary, intensive care characteristics using an objective, quantitative methodology that can be applied to future studies. This methodology, validated in a national study, indicates that there is a precise relationship between severity of illness (physiologic instability as assessed by the Pediatric Risk of Mortality [PRISM] score) and intensive care outcome (i.e., survival or death) in university pediatric intensive care units with intensivist directors. We hypothesize that the precise relationship between severity of illness and outcome will not hold consistently in all pediatric ICUs, resulting in underestimation of mortality.

Gadsden County Child Health System Project
Gadsden Citizens for Healthy Babies
215 West Jefferson Street, Suite B
Quincy, FL 32351
(904) 875-1188

MCHIP
MCJ-123401
10/01/90–09/30/95
Project Director(s):
Sylvia Forehand Byrd

The Gadsden County Child Health System Project will improve maternal and child health outcomes by developing linkages between local maternal and child health care providers using a shared electronic health record, a system of case managers, and expanded interagency council functions. It will increase provider effectiveness and efficiency by making it possible for providers to immediately access a child's health record, will assist families to better care for their children by having consistent health care providers, and will facilitate the process of document collection necessary for school entry.

Improvement of Children's Health Care in Pediatric Practice
American Academy of Pediatrics
141 Northwest Point Boulevard
P.O. Box 927
Elk Grove Village, IL 60009-0927
(708) 981-7633

Research
MCJ-177022
10/01/90–09/30/93
Project Director(s):
Gretchen V. Fleming, Ph.D.

This project, carried out by the American Academy of Pediatrics (AAP), proposes to work toward the identification of more effective approaches to children's health care in ambulatory settings by meeting four objectives: (1) Gather information about pediatricians' care and treatment practices in primary care settings; (2) provide a structure for learning more about the effectiveness of care and treatment practices in primary care settings; (3) provide feedback to pediatricians, other physicians and primary care practitioners, and public health groups so that they may act on this information; and (4) provide experience to a large group of primary care pediatricians in how to research these issues.

Iowa Child Health Systems
Iowa Department of Public Health
Division of Family and Community Health
Lucas Building, Third Floor
321 East 12th Street
Des Moines, IA 50319-0075
(515) 281-7801

MCHIP
MCJ-193702
10/01/90–09/30/95
Project Director(s):
Darryl Leong, M.D., M.P.H.

Two major goals of the project are to: (1) Develop and implement community models for assuring primary care for children, regardless of the child's or family's entry point into the system; and (2) develop the capacity and function for a statewide system of family-centered, community-based primary care services for children in Iowa. There are two major components: (1) The local level system development which includes the formation and support of a child health steering committee; and (2) the State level component which is similar to the local level, but with tangible products including a family health data system, a formalized data linkage system with other agencies, rules for information-sharing that protect privacy, a child health surveillance and monitoring system, the development of a statewide child health policy, and an ongoing planning process integrated with Iowa's Title V activities.

Healthy Families and Young Children
Kansas Department of Health and Environment
Landon State Office Building
900 Southwest Jackson
10th Floor
Topeka, KS 66612-1290
(913) 296-1303

MCHIP
MCJ-203817
10/01/88–09/30/91
Project Director(s):
Linda Kenney

This project will use the home visitor concept as a method of improving the health of young children. Trained lay visitors, supervised by registered nurses, will provide in-home family support services and link families with available community resources. Baseline data on immunization compliance levels, accidental deaths, and child abuse and neglect will be compared with quarterly statistics over the 3-year grant cycle to determine whether health status improvement objectives are met.

Family Care Center Health Project
Lexington–Fayette Urban County Government
1135 Redmile Place
Lexington, KY 40504
(606) 288-4040

MCHIP
MCJ-218402
10/01/89–09/30/94
Project Director(s):
Doane Fischer, M.D.

The goals of this project are to: (1) Improve the health status of each child through a program of accessible and affordable periodic health screening, preventive health care, injury prevention, and primary health care services; (2) maximize the potential and overall functioning of each child through early identification of and intervention with potentially handicapping conditions, and treatment and monitoring of chronic health problems; and (3) enable and empower parents to increase their responsibility and participation in their child's health care through systematic interdisciplinary parenting education, counseling, and support.

First Steps Primary Prevention Program
Louisiana Council on Child Abuse, Inc.
333 Laurel Street, Suite 875
Baton Rouge, LA 70801
(504) 346-0222

MCHIP
MCJ-228613
10/01/90–09/30/95
Project Director(s):
Jane Bahlinger
Jeanne Griffith

The goal of the First Steps Primary Prevention Program is to develop a healthy environment that promotes and maintains nurturing relationships between parents and their children. Its development and outreach objectives will be achieved in two stages over 5 years. To successfully and effectively curb and/or completely eradicate child abuse and neglect in Louisiana, the program is designed to be implemented by "all-out concentrated efforts" cooperatively exerted by the public and private sectors, including social and health care service providers.

Collaborative Developmental Clinic
Michigan State University
Pediatrics/Human Development
B-240 Life Science Building
East Lansing, MI 48824
(517) 355-8998

MCHIP
MCJ-268514
10/01/90–09/30/95
Project Director(s):
Marsha D. Rappley, M.D.

The purpose of this project is to design a system that will bring together the pediatrician, the child psychologist, and the school consultant in a clinic that will comprehensively evaluate and offer treatment for the parents and child. This project proposes to serve children and families from widely diverse cultural backgrounds and all socioeconomic levels. Children with behavioral problems that impact on school and home are vulnerable to morbidity associated with school and social failure. The Collaborative Developmental Clinic will: (1) Improve access to comprehensive developmental evaluation, specifically improving access for lower socioeconomic families who have been traditionally underrepresented in developmental clinic populations; (2) create opportunities for treatment modalities that are classroom and family oriented in addition to the judicious use of medication in the management of behavioral problems; and (3) establish the economic feasibility of the comprehensive team approach to behavioral problems.

Outcome Evaluation of a Pediatric Health Care Model
Medical and Health Research Association of New York City
Pediatric Resource Center Outcome Study
40 Worth Street, Room 723
New York, NY 10013
(212) 393-1310

Research
MCJ-360539
01/01/87–12/31/90
Project Director(s):
Jack Elinson, Ph.D.
Penny Liberatos, M.A., M.Phil.

The objective of this study is to test a model of pediatric health care delivery, the Pediatric Resource Center (PRC), designed to reach low-income, high-risk children. The study is focused on the model as implemented at seven clinic sites in New York City. The PRC model provides comprehensive care in a team setting, maintaining continuity and linkages to a network of health and social services. The hypothesis under examination is that children, after receiving PRC services for a specified period of time, have better health outcomes than do children in a comparison group, and that mothers of PRC children have more knowledge and better attitudes with respect to health care.

Simultaneous Screening for Hearing, Speech, and Language
Duke University Medical Center
Child Development Unit
Department of Pediatrics
Durham, NC 27706
(919) 684-5513

Research
MCJ-370574
01/01/88–09/30/91
Project Director(s):
Raymond A. Sturner, M.D.

The goals of this study are to: (1) Develop a means of screening for speech, language, and hearing problems in a child health setting, utilizing no more time than is ordinarily committed to hearing screening alone; and (2) improve the current hearing screening procedures in order to be more sensitive to a wider range of audiologic impairments than is possible by current, routine pure tone screening procedures.

Improved Compliance with Well-Child Care: *El Niño Sano* Project
La Clinicia del Carino Family Health Care Center
2690 May Street
P.O. Box 800
Hood River, OR 97031
(503) 386-6380

MCHIP
MCJ-413816
10/01/88–9/30/91
Project Director(s):
Colin S. Wood

This project seeks to address the disproportionately high incidence of preventable and treatable diseases and conditions among the migrant and seasonal farmworker (MSFW) child population by demonstrating to MSFW parents that well-child care and related preventive services are necessary. The main component of the program involves conducting 100 well-child care field clinics in area farm labor camps over a 3-year period.

Project KIDS: Caring for Kids of the Working Poor
Western Pennsylvania Caring Foundation
500 Wood Street, Suite 600
Pittsburgh, PA 15222
(412) 255-8033

MCHIP
MCJ-427028
09/01/90–09/30/91
Project Director(s):
Dolores S. Wilden

The goal of this project is to augment the Caring Program for Children, a community-supported initiative which provides primary health care benefits for children from working poor families whose incomes fall below Federal poverty guidelines but above the Pennsylvania Medicaid ceiling. This project will augment the Caring Program by: (1) Demonstrating that participation in the project increases children's access to and utilization of health and oral health care services; (2) integrating an education component for parents of participating children which focuses on availability of benefits and effective and efficient utilization of benefits; and (3) stimulating and promoting replication of the Caring Program for Children by Blue Cross and Blue Shield Plans regionally and nationally.

Comprehensive Approach to Promoting Child and Family Health
South Carolina Department of Health
and Environmental Control
2600 Bull Street
Columbia, SC 29201
(803) 734-4650

MCHIP
MCJ-453712
10/01/88–09/30/91
Project Director(s):
Frances C. Wheeler, Ph.D.

The goal of this project is to improve the health status of black children and youth in three rural South Carolina counties. Specifically, the project will work to: (1) Increase the percentage of children, youth, parents, and teachers practicing healthy behaviors; (2) increase parent-child communication about health concerns; and (3) increase the percentage of school-age children and youth with an identified "medical home." The project uses a combination of proven interventions, including health education and promotion projects based at the worksite, school, and church.

Child Health

Health and Safety in Child Care Settings

Alabama Day Care Health and Safety Program
Alabama Department of Public Health
Bureau of Family Health Services
434 Monroe Street
Montgomery, AL 36130-1701
(205) 242-5760

MCHIP
MCJ-016023
10/01/89–09/30/92
Project Director(s):
Lloyd M. Hofer, M.D., M.P.H.

The goal of this demonstration project is to develop and implement a comprehensive health and safety curriculum in child day care settings to improve the health status of children. A comprehensive educational program will be developed and presented in the day care setting with a positive parenting component, a children's component, and a day care worker component. This educational curriculum will demonstrate positive changes in child health indicators, day care environment, and safety, and increased knowledge of child development, health, and safety issues on the part of parents and day care workers.

California Child Health in Day Care
San Diego State University
5300 Campanile Drive
San Diego, CA 92182
(619) 594-4668

MCHIP
MCJ-063710
10/01/88–09/30/91
Project Director(s):
Betty Z. Bassoff, D.S.W.

This project seeks to demonstrate an improved data reporting system. Project objectives include: Collecting baseline data not currently available on the incidence and prevalence of selected infectious diseases and injuries in day care settings; implementing a system for organizing the training of child care providers in preventive health practices at the local level; developing a way to provide ongoing consultation and updated information to trainers and providers; and producing a reduction in the incidence and prevalence of infectious diseases and injuries as a result of widespread provider training.

Development of National Health and Safety Standards in Out-of-Home Child Care Programs
American Public Health Association
1015 15th Street, N.W.
Washington, DC 20005
(202) 789-5627

MCHIP
MCJ-113001
07/1/87–09/30/91
Project Director(s):
Debra Hawks Peabody, M.P.H.

This project seeks to develop a comprehensive set of performance standards for health, safety, nutrition, and sanitation in out-of-home care. The project will conduct a national survey of existing State regulations related to child day care and will identify exemplary child care programs worthy of replication. The proposed performance standards will be widely distributed for critical review by child care providers, consumers, health professionals, and additional technical reviewers.

Health Promotion in a Group Child Care Setting
Georgia State University
Department of Parent/Child Nursing
School of Nursing
P.O. Box 4019
Atlanta, GA 30302-4019
(404) 651-3164

MCHIP
MCJ-133711
10/01/88–09/30/91
Project Director(s):
Sherry K. Gaines Ph.D., R.N.

The focus of this project is the provision of comprehensive health care services to a culturally diverse group of children enrolled in a child development center housed on an urban university campus. A nursing clinic will be established in the child development center. Project objectives include increasing the number of women who breastfeed; promoting dental health; decreasing the transmission of infectious diseases; decreasing the number of injuries; increasing the child care providers' awareness of cultural issues; and detecting developmental, nutritional, hearing, and vision deficiencies, as well as inappropriate parenting.

Reducing Children's Exposure in Family Day Care Settings to Environmental Tobacco Smoke
Massachusetts Health Research Institute
101 Tremont Street, Suite 600
Boston, MA 02108
(617) 426-6378 or 727-0732

MCHIP
MCJ-256024
10/01/89–09/30/92
Project Director(s):
Jonathan Spack
Gregory N. Connolly, D.M.D., M.P.H.

The overarching goal of this demonstration project is to improve the health of infants and children by reducing their exposure to environmental tobacco smoke (ETS) in family day care settings. Through education of family day care providers, child health will be improved in two ways: (1) Reduction of ETS during child care hours, and (2) provider role modeling of healthful habits for children and parents.

Child Care Health Promotion Project
New Mexico Health and Environment Department
Public Health Division
Nutrition Bureau
1190 Saint Francis Drive, N3050
Santa Fe, NM 87503
(505) 827-2469

MCHIP
MCJ-356021
10/09/89–09/30/92
Project Director(s):
Jeanne Colegrove, R.D.

The Child Care Health Promotion Project will address the health needs of New Mexico's child care population through the implementation of health promotion programs in child care settings. The goal of this project is to improve the health status of children ages 1–5 in McKinley and Rio Arriba Counties by empowering child care providers to make appropriate health behavior changes and to conduct quality health promotion programs, projects, and services in their child care settings.

Fostering Improved Health Status for Foster Care Children
Kids Adjusting Through Support, Inc.
255 Alexander Street
Rochester, NY 14607
(716) 232-5287

MCHIP
MCJ-368218
10/01/90–09/30/85
Project Director(s):
Michael H. Henrichs, Ph.D.

Through the already well-established Kids Adjusting Through Support (KATS) program, support groups will be developed for children 6–18 years of age who are in foster care and their foster parents. Families will be invited to participate in the program and the children will be stratified by age into groups, which will meet separately with trained mental health counselors. Foster parents will meet simultaneously in groups to deal with issues of child behavior, limit-setting, differences in value systems, and the ambivalence that comes with forming attachments to a child whom they may lose again when the child's placement is altered. The KATS Foster Care groups will meet for 10 weeks, at weekly intervals, focusing on those issues common to most foster children and families.

Fecal Coliforms and the Risk of Diarrhea in Child Day Care
University of North Carolina at Chapel Hill
Maternal and Child Health
407 Rosenau Hall, 201H, CB #7400
Chapel Hill, NC 27599-7400
(919) 966-5981

Research
MCJ-370603
10/01/90–09/30/91
Project Director(s):
Jonathan B. Kotch, M.D., M.P.H.

Diarrheal disease prevention has historically been achieved through the maintenance of hygienic standards in high-risk institutions such as hospitals and restaurants. Similar standards have not yet been set for day care centers in the United States. The main objective of this study is to determine how the level of environmental contamination with fecal coliforms (which reflect the potential for enteric disease transmission) relates to diarrheal disease incidence in the day care environment. This study will assess whether the intervention day care centers differ from two control centers with respect to hygienic practice scores, level of fecal contamination, and mean diarrheal incidence.

Otitis Media in Children and Later Language and Learning
University of North Carolina at Chapel Hill
Frank Porter Graham Child Development Center
105 Smith Level Road, CB #8180
Chapel Hill, NC 27599-8180
(919) 966-7164

Research
MCJ-370599
10/01/90–09/30/95
Project Director(s):
Joanne E. Roberts, Ph.D.

This project will examine the extent to which otitis media with effusion (OME) or middle ear disease, with accompanying hearing loss during early childhood, relates to the development of speech, language, other selected neuropsychological processes, and academic achievement during the preschool years. The specific aims of the study are to examine: (1) The relationship between the amount of OME (number of days) with accompanying hearing loss during infancy and the preschool period and patterns of speech, language, and neuropsychological development during the preschool period; and (2) other factors such as gender or stimulation within the home environment that might interact with OME to predict later development of language and learning skills.

Family Day Care Home Health and Safety Project
Ohio Department of Health
Division of Maternal and Child Health
246 North High Street
P.O. Box 118
Columbus, OH 43266-0118
(614) 466-8932

MCHIP
MCJ-396022
10/01/89–09/30/92
Project Director(s):
Ruth O. Shrock, M.S., R.D., L.D.

The overall mission of this project is to promote a safe and healthy environment that fosters the optimum growth and development of children ages birth to 6 years being cared for in family day care homes. The major project goals are to (1) encourage coordination and communication among State agencies that address the health needs of children in day care; (2) reduce the health and safety risks for children and providers in family day care homes; (3) promote networks between public health agencies and family day care homes at the community level; and (4) promote healthy living behaviors in family day care homes.

Otitis Media in Day Care: Effects on Language/Attention
Pennsylvania State University
Department of Human Development and Family Studies
S-110 Henderson Human Development Building
University Park, PA 16802
(814) 865-3034

Research
MCJ-420565
03/01/88–02/28/93
Project Director(s):
Lynne Feagans, Ph.D.

This 5-year study is designed to determine whether there is a causal relationship between otitis media observed in a day care setting and developmental delays in language and attention. Otitis media is the second most frequent reason parents take their children to a physician. Although antibiotic regimens have helped to reduce the acute phase of the disease, there is no really effective therapy for the fluid that often remains in the middle ear after the acute phase is over. This fluid is associated with a mild to moderate hearing loss.

Pennsylvania Chapter of the American Academy of Pediatrics Early Childhood Education Health Promotion Project
Pennsylvania Chapter of the American Academy of Pediatrics
The Dayton Building, Suite 220
610 Old Lancaster Road
Bryn Mawr, PA 19010
(215) 520-9123

MCHIP
MCJ-426025
10/01/89–09/30/92
Project Director(s):
Susan S. Aronson, M.D.

The goal of this project is to improve the health status of children in early childhood programs in Pennsylvania. To reach this goal, the Early Childhood Education Health Promotion Project will: (1) Establish a statewide registry of health consultants to serve early childhood education programs; (2) provide training for staff in each participating program; (3) focus technical assistance efforts on problems identified by a data-based assessment of health problems; and (4) provide access to project consultants, staff, and resources for staff of participating programs. A sample of 400 children in the treatment group and 400 in the control group will be tracked by outcome objectives. The difference between these two groups, as shown in pretest and posttest data, will be used to measure program effectiveness.

Primary Care for Children in Foster Care and Homeless Shelters
Children's Hospital of Pittsburgh
Family Intervention Center
Fifth Avenue at DeSoto Street
Pittsburgh, PA 15213
(412) 692-7186

MCHIP
MCJ-428319
10/01/90–09/30/95
Project Director(s):
Mary M. Carrasco, M.D.

This project will coordinate delivery and monitoring of primary health care to 250 children in foster care and 250 children in shelters. Case management will ensure enhancement or expansion of services. The project will work extensively with community agencies, assist in placing children in permanent medical homes, assess and monitor immunization status (with a view to a 50 percent improvement in par status), develop a computerized tracking system, and test the effectiveness of family-carried health records. Support and advocacy for parents or caretakers are designed to enroll these children in mainstream health care programs.

Child Health

Emergency Medical Services

Alaska EMS for Children
Alaska Department of Health and Social Services
EMS Section
Division of Public Health
P.O. Box H-06C
Juneau, AK 99811-0600
(907) 465-3027

EMSC
MCH-024001
10/01/89–09/30/91
Project Director(s):
Mark S. Johnson, M.P.A.

The overall goal of this project is to improve the emergency medical care system and its ability to treat and rehabilitate Alaska's acutely ill and injured children. The project addresses deficiencies in the emergency medical services (EMS) system at all levels, including prehospital, hospital, and rehabilitative services.

Demonstration Project: EMS for Children
University of Arkansas for Medical Sciences
Arkansas Children's Hospital
800 Marshall Street
Little Rock, AR 72202
(501) 320-1845

EMSC
MCH-054001
10/01/87–09/30/91
Project Director(s):
Debra H. Fiser, M.D.

This project utilizes a broad-based approach to evaluate and improve the outcome of pediatric emergencies in Arkansas. It was designed with four primary purposes: (1) Increase the level of knowledge regarding the consequences of critical illness and injury in children in the State of Arkansas; (2) improve the emergency medical services provided to those children during and after the project period, particularly to handicapped and minority children; (3) determine the effectiveness of the proposed methodologies for the reduction of morbidity and mortality associated with childhood illness and injury; and (4) determine effective methods of imparting the knowledge gained to other States in a manner resulting in the adoption of effective programs by those States.

Emergency Medical Services for Children—
Focus on the Neurologically Impaired Child
George Washington University
Children's National Medical Center
Trauma Center
111 Michigan Avenue, N.W.
Washington, DC 20010
(202) 939-4927

EMSC
MCH-114001
10/01/87–09/30/91
Project Director(s):
Jane Ball, Dr.P.H.

The enhancement of emergency medical services for children is expected to reduce the morbidity and mortality for children with acute illnesses and injuries. An estimated 1,000,000 children experience a closed head injury annually. Traumatic brain injury (TBI) has a high mortality rate, and an estimated 16 percent of TBI children require hospitalization. Significant morbidity, particularly in cognitive functioning and behavior, has been reported in the literature. This demonstration project addresses the consequences of TBI in children and focuses on the rehabilitation component of EMSC. The goal of this project is to explore the consequences of pediatric TBI and the needed rehabilitation services for children and their families.

Study of Pediatric Emergency Medical Services
Institute of Medicine
2101 Constitution Avenue, N.W.
Washington, DC 20418
(202) 334-2184

EMSC
MCJ-117025
10/01/90–06/30/91
Project Director(s):
Karl D. Yordy

The Institute of Medicine will conduct an 18-month study of pediatric emergency services. The project will: (1) Describe the current state of services and the characteristics and consequences of pediatric emergencies; (2) identify problems; (3) study responses to these problems and define data and standards for monitoring emergency services and outcomes; (4) estimate the costs and benefits of moving toward a system better tailored to the needs of children; and (5) recommend steps the Federal Government can take to develop better systems to reduce the toll from pediatric emergencies.

Emergency Medical Services Grant for Children
University of Florida College of Medicine
University Hospital of Jacksonville
655 West Eighth Street
Jacksonville, FL 32209
(904) 798-5915

EMSC
MCH-124001
10/01/87–06/30/91
Project Director(s):
Joseph J. Tepas, M.D.

This project evaluates emergency medical services for children by coordinating the clinical, research, and educational efforts of the three major components of pediatric emergency care—pediatric critical care medicine, pediatric emergency medicine, and pediatric trauma care. This evaluation focuses on death and/or disability as the ultimate final consequences of critical illness or injury in children, and evaluates the effects of shock, respiratory failure, and coma. The pediatric population requiring emergency care is defined by combining existing component data bases into a single system to record epidemiologic, demographic, socioeconomic, and physiologic characteristics of children presenting for emergency care in northeast Florida.

Emergency Medical Services for Children
Hawaii Department of Health
Emergency Medical Services Systems Branch
3627 Kilauea Avenue, Room 102
Honolulu, HI 96816
(808) 735-5267

EMSC
MCH-154001
10/01/87–09/30/91
Project Director(s):
Donna Maiava
Calvin Sia, M.D.

The goal of this project is to reduce the consequences of critical illness and injury in the pediatric population. The project will develop the following: (1) A quality assurance system for a vertically integrated EMSC program; (2) a competency-based curriculum for training nurses in pediatric emergency care; (3) skills, drugs, and equipment standards; (4) epidemiological studies of critical illness and injury in Hawaii; (5) a system for identification of special needs of children with handicapping conditions; (6) a rehabilitation plan for the State; (7) an education and training program for all levels of pediatric emergency care; (8) a preschool injury prevention program; and (9) a curriculum for an emergency medical system for Micronesia.

Idaho Statewide EMSC Project
Idaho Department of Health and Welfare
Health Division
EMS Bureau
450 West State Street
Boise, ID 83720
(208) 344-5994

EMSC
MCH-164001
10/01/89–09/30/91
Project Director(s):
Paul Anderson

The Idaho Statewide Emergency Medical Services for Children (EMSC) Project will strive to reduce mortality and morbidity due to childhood illness and injury by: (1) Developing regional EMSC councils to address EMSC issues in order to implement EMSC subsystems; (2) conducting educational programs for providers and public prevention/education campaigns; (3) developing innovative approaches to improve the knowledge and skills of rural area providers; and (4) conducting EMSC studies in a rural environment.

Emergency Services for Children for Louisiana
Tulane University School of Medicine
1430 Tulane Avenue
New Orleans, LA 70112
(504) 587-7408

EMSC
MCH-224001
10/01/89–09/30/91
Project Director(s):
William D. Hardin, Jr., M.D.

The long-term goal of the Louisiana Emergency Medical Services for Children (EMSC) project is to reduce the morbidity and mortality of pediatric emergencies by developing a statewide system for emergency pediatric care. This project will incorporate features of previous EMSC grant recipients while offering new initiatives to expand upon previous efforts. Particular attention will be focused on the emergency medical care needs of handicapped children and those who require chronic ventilatory assistance.

Emergency Medical Services for Children
Maine Emergency Medical Services
Medical Care Development, Inc.
11 Parkwood Drive
Augusta, ME 04330
(207) 622-7566

EMSC
MCH-234001
10/1/87–09/30/91
Project Director(s):
Charles Danielson, M.D.

This project develops and evaluates a rural emergency medical services for children (EMSC) demonstration program and provides assistance to other rural States in adopting the successful aspects of the program. The focus of the project is the development of a modular training program on care of pediatric emergencies that can be presented in appropriate segments to all levels of prehospital and emergency room personnel. Improved skills and knowledge in emergency care for children will result in improved medical management of children requiring emergency care and will reduce the consequences of the emergency events.

Organization for Comprehensive Emergency Medical Services for Children in Maryland
University of Maryland at Baltimore
Maryland Institute for EMS Systems
22 South Greene Street
Baltimore, MD 21201
(301) 328-8976

EMSC
MCH-244001
10/01/87-09/30/91
Project Director(s):
James Flynn, M.D.

This project expands and constructs a system of emergency medical services for children with life-threatening illnesses and injuries in the State of Maryland. These efforts represent an extension of the recent statewide pediatric trauma system which has been operational for more than 15 years and integrates other regional pediatric critical care activities. In addition, attention will be focused on the organization and improvement of existing emergency medical services for pediatric critical illness. This pediatric critical illness supplement is a natural evolution of our experience with pediatric trauma, neonatal transport, and pediatric burns, all of which are ongoing components of the Maryland Institute for Emergency Medical Services Systems (MIEMSS).

Emergency Medical Services for Children
University of New Mexico School of Medicine
Division of Emergency Medicine
2211 Lomas Boulevard, N.E.
Albuquerque, NM 87131
(505) 277-5066

EMSC
MCJ-354001
10/01/90-09/30/92
Project Director(s):
David Sklar, M.D.
Paul B. Roth, M.D.

This project will use a multifaceted approach to reduce pediatric injury and illness. The following products will result from grant support: (1) A quality assurance system that includes data collection, problem identification, and feedback to all levels of care resulting in improved education, services, and legislation; (2) a children's injury prevention program; (3) improved clinical and prehospital training programs; (4) a statewide coalition to improve Emergency Medical Services for Children systems response; (5) a Native American component for training and prevention; and (6) a component which specifically targets substance abuse in elementary, middle, and high schools.

Emergency Medical Services for Children
University of North Carolina at Chapel Hill
North Carolina Children's Hospital
7001 J, 7th Floor
CB #7220
Chapel Hill, NC 27599-7220
(919) 966-7495

EMSC
MCJ-374001
10/01/90-09/30/92
Project Director(s):
Arno Zaritsky, M.D.

This demonstration project will enhance the emergency medical services (EMS) system in North Carolina by improving the system's ability to manage pediatric patients. The project goal is to create a statewide model EMS system that minimizes further injury or deterioration of seriously ill or injured pediatric patients prior to their arrival at a definitive care center. We will create a project group and an advisory board to help achieve the project goals through a cooperative statewide effort that includes representation from all groups responsible for the care of seriously ill and injured pediatric patients.

Emergency Medical Services for Children Demonstration Grant
Ohio Department of Health
Division of Maternal and Child Health
246 North High Street
P.O. Box 118
Columbus, OH 43266-0118
(614) 466-3263

EMSC
MCJ-394001
10/01/90-09/30/91
Project Director(s):
James F. Quilty, Jr., M.D.

The Division of Maternal and Child Health of the Ohio Department of Health has established a plan for the development of sustainable improvements in emergency medical services for children in rural/farm areas in Ohio and the linkage of these areas with sophisticated children's medical centers in their regions. The emphasis of the project is community organization, assessment of current status and needs, and development of locally adapted programs. The program components will include public information and education for prevention, awareness of need, first aid, and access to the emergency medical services (EMS) system.

Utah Emergency Medical Services for Children
Utah Department of Health
Bureau of Emergency Medical Services
P.O. Box 16660
Salt Lake City, UT 84116-0660
(801) 538-6435 or 588-3280

EMSC
MCJ-494001
10/01/90-09/30/92
Project Director(s):
Jan M. Buttrey
J. Michael Dean, M.D.

The four major long-range health goals of this project are: (1) All infants and children will have access to an appropriate tertiary or stabilizing facility within 60 minutes of injury or notification of the Emergency Medical Services system anywhere in the Intermountain Region; (2) motor vehicle accident mortality in infants and children will be reduced by 10 percent between 1991 and 1995; (3) poisonings and unintentional drug ingestions in infants and children will be reduced by 10 percent between 1991 and 1995; (4) mortality and morbidity of burn-related injuries will be reduced by 15 percent between 1991 and 1995, and access time from injury to stabilizing hospital will be reduced to 60 minutes throughout the Intermountain Region.

EMS for Children: Improvement of the Pediatric Component of a Rural EMS System
Vermont Department of Health
EMS Division
131 Main Street
P.O. Box 70
Burlington, VT 05402
(802) 863-7310

EMSC
MCH-504001
10/01/89-09/30/91
Project Director(s):
Peter Garon

This project will enhance the pediatric care capabilities of Vermont's Emergency Medical Services (EMS) system as an integral part of the State's long-term EMS developmental program. The highest priorities for the second project year will be: (1) Establishment of the emergency medical services for children (EMSC) information system; (2) training of prehospital and in-hospital EMS providers; (3) community organization via the EMSC Coalition; (4) continuation/expansion of prevention initiatives in the areas of bicycle safety, burns/scalds, playground safety, and agricultural safety.

Emergency Medical Services for Children
Washington Department of EMSC Health
Washington Children's Hospital and Medical Center
1914 North 34th Street, Suite 405
Seattle, WA 98103
(206) 632-0066

EMSC
MCH-534001
10/01/87–09/30/91
Project Director(s):
Dena Brownstein, M.D.

The goals of the project are to: (1) Eliminate excess morbidity and mortality in pediatric emergencies resulting from inadequate knowledge, equipment, and support of prehospital care providers and hospital-based medical personnel; and (2) eliminate excess morbidity and mortality among minority children due to cultural, language, and economic barriers to emergency care. The objective of this project is to address the technical information needs of prehospital and emergency room providers, focusing on trauma, seizures, and drowning.

Improving Emergency Services for Children in Wisconsin
Wisconsin Department of Health and Social Services
Division of Health, Emergency Medical Services Section
1 West Wilson Street
P.O. Box 309
Madison, WI 53703
(608) 266-0470

EMSC
MCH-554001
10/01/87–09/30/91
Project Director(s):
Michael R. French

This project seeks to: (1) Call attention to the need for improved emergency medical services (EMS) response to the acutely ill or injured child; (2) identify and describe the incidence, types, causes, prehospital and hospital treatments, and outcomes of pediatric emergencies in Wisconsin; (3) provide information, education, and training to parents, prehospital EMS personnel, and hospital staffs; (4) develop programs to improve the emergency medical services provided to children in the Native American and farm populations in Wisconsin; (5) develop programs to assess the need for and the resources required to provide counseling and psychological support services to parents and emergency services personnel in the aftermath of severe pediatric illness or injury; and (6) develop a comprehensive plan for statewide improvement of the emergency medical services provided to the pediatric population.

Child Health

Lead Poisoning Prevention

Lead Poisoning Training Project
Kentucky Department for Health Services
Cabinet for Human Resources
Division of Maternal and Child Health
275 East Main Street
Frankfort, KY 40621
(502) 564-4830

Genetics
MCJ-211003
10/01/82–09/30/95
Project Director(s):
Patricia K. Nicol, M.D., M.P.H.

The goal of this project is to establish and maintain a childhood lead poisoning prevention training and resource center which can provide State and local MCH staff and other health service providers who are involved with or interested in developing pediatric lead poisoning programs. Project objectives are to: (1) Present technical information conveying the essential components of a childhood lead poisoning prevention program through four 3-1/2-day workshops; (2) develop a semiannual publication to be distributed to workshop participants and Federal, State, and local personnel involved in childhood lead poisoning program activities; and (3) develop a resource center which will be available to provide 25 consultation and technical assistance contacts to State and local childhood lead poisoning prevention programs.

Use of High Calcium Infant Formula to Prevent Plumbism
Dartmouth College
Fowler House
Dartmouth-Hitchcock Medical Center
Hanover, NH 03756
(603) 646-881

Research
MCJ-330597
10/01/90–09/30/92
Project Director(s):
James D. Sargent, M.D.

This study represents a first step in exploring an alternative form of primary prevention of lead poisoning in children using the nutritional supplement calcium glycerophosphate added to infant formula to reduce lead absorption from the gastrointestinal tract. Subjects will be children ages 6–15 months, a period where the mean blood lead of at-risk cohorts rises rapidly. In this randomized clinical trial, we plan to explore the efficacy of two levels of calcium supplementation as compared to standard infant formula, estimate its effect, and establish its safety and acceptability. In addition, we will gather prospective data on blood lead, growth, and other covariants of plumbism in children such as maternal education, housing status, and iron status.

Nationwide Blood Lead and Erythrocyte Protoporphyrin Proficiency Testing Program
Wisconsin State Laboratory of Hygiene
University of Wisconsin at Madison
465 Henry Mall
Madison, WI 53706
(608) 262-1146

Genetics
MCJ-551003
10/01/88–09/30/93
Project Director(s):
Patricia H. Field, Ph.D.
Noel Stanton

The goal of this project is to improve the detection and treatment of lead-poisoned children by providing a free monthly proficiency testing program for both lead and erythrocyte protoporphyrin to any interested laboratory. The major objectives are to: (1) Provide these specimens; (2) summarize and distribute results of the survey; (3) increase the number of participants; (4) provide information and assistance to participants; (5) perform relevant research projects; and (6) update the blood lead program to conform to proposed Clinical Laboratory Improvement Act regulations.

Child Health

Violence/Injury Prevention

Arizona Child/Adolescent Injury Prevention Initiative
Arizona Department of Health Services
Office of Maternal and Child Health
1740 West Adams
Phoenix, AZ 85007
(602) 542-1880

MCHIP
MCJ-043888
10/01/87–09/30/91
Project Director(s):
Cynthia R. Hill, B.A.

The goal of the initiative is to reduce injuries and deaths among children and adolescents in Arizona. The program objectives are to: (1) Increase awareness of child/adolescent injury problems in Arizona by providing professional training, developing an injury prevention clearinghouse, and facilitating injury prevention programs in local communities; (2) establish a mechanism for inter- and intra-agency injury prevention program coordination; (3) assess existing injury data and develop a childhood/adolescent injury morbidity database plan for Arizona; (4) facilitate expansion of peer-based adolescent injury prevention programs; and (5) facilitate development of all terrain vehicle (ATV) student training programs in select counties where adolescents continue to operate ATVs.

National Symposium on Child Victimization
Children's Hospital National Medical Center
111 Michigan Avenue, N.W.
Washington, DC 20010
(202) 939-4950

MCHIP
MCJ-117017
07/01/90–06/30/91
Project Director(s):
Mireille B. Kanda, M.D.

The 1990 symposium involves 11 plenary session speakers, 4 of whom are public health professionals. An additional four representatives from the Centers for Disease Control are faculty or paper presenters. Besides plenaries, conference offerings include 18 major concurrent panel sessions, 24 skills development workshops, and 180 paper/poster presentations. A significant proportion of these program elements address issues specific to the public health arena.

Pacific Basin Child Protection Initiative
University of Guam
University of Guam Station
Mangilao, GU 96923
(671) 734-4717

MCHIP
MCJ-667029
10/01/90–09/30/92
Project Director(s):
Augusta Rengiil, R.N., M.P.H.

The goal of this project is to assist the U.S.-Related Pacific Islands in establishing and implementing a program strategy for the prevention and treatment of child abuse and neglect. Specific objectives of the project include: (1) Providing technical assistance in identification, risk assessment, and intervention protocol; (2) establishing a Child Protection Service program in those jurisdictions that do not have a formalized system, and evaluating those with an existing system; (3) establishing an information system to identify children at risk; (4) developing public education programs; and (5) working with traditional leaders, community leaders, and organizations to enact laws that will protect the rights of children in their jurisdictions and to review and reform existing child protection statutes with respect to their cultural sensitivity.

Regionalization of Care for Abused Children
Indiana University
Research and Sponsored Programs
620 Union Drive, Room 530
Indianapolis, IN 46202-5167
(317) 274-8271

MCHIP
MCJ-183902
10/01/88–09/30/91
Project Director(s):
Roberta A. Hibbard, M.D.

The ultimate goal of the project is to regionalize care for the evaluation of child abuse victims so that every child abuse victim will have thorough medical evaluation and treatment by knowledgeable health care providers who coordinate services with social, legal, and mental health professionals. The project objectives are to: (1) Increase the number of children reported to the Marion County Welfare Department Child Protective Services who receive medical and mental health evaluations by expanding the network of professionals who regularly communicate and coordinate services for the multidisciplinary, interagency evaluation of child abuse victims; and (2) design, develop, and submit a research proposal that can assess the impact of regionalized care on health status outcomes and that is acceptable to the board of national advisors.

Injury Prevention for School-Age Children and Youth
Kansas Department of Health and Environment
Office of Chronic Disease and Health Promotion
Landon State Office Building
900 Southwest Jackson Street, Tenth Floor
Topeka, KS 66612-1290
(913) 296-1237 or 296-1223

MCHIP
MCJ-203889
10/01/87–09/30/91
Project Director(s):
Joyce Markendorf, R.N., M.N.

The first goal of the project is to reduce the number of nonfatal sports-related injuries to children and youth, grades 7–12, who attend Kansas schools. Objectives for accomplishment of this goal are to: (1) Document the sports-related morbidity rate; and (2) promote the concept of and skills necessary to provide preparticipation physical examinations to student athletes through education of school nurses, coaches, and primary care physicians. The second goal is to reduce the number of injuries sustained on playgrounds during school hours among children grades K–6. Objectives for accomplishment of this goal are to: (1) Document school playground-related injuries among children grades K–6; (2) develop a manual, *Kansas Guidelines for Playground Safety*, for use by schools; and (3) promote through education the skills necessary to assess playground hazards and develop a plan for remedial action.

Behavioral and Familial Predictors of Injuries in Children
Johns Hopkins University
School of Hygiene and Public Health
615 North Wolfe Street
Room 6030
Baltimore, MD 21205
(301) 955-3479

Research
MCJ-240591
11/01/89–04/30/93
Project Director(s):
Penelope M. Keyl, Ph.D.

This longitudinal study investigates the relationship of child behavioral qualities, family structure, and family environment to the occurrence and severity of injury among school-age children. This project draws its sample from an ongoing prevention/intervention research study performed by the Prevention Research Center (PRC) investigating the effects of two interventions on early school behavior and subsequent behavior problems. In addition, some of the data regularly collected by the PRC research study are used in the project.

HHS Region III Childhood Injury Prevention Project
Johns Hopkins University
School of Hygiene and Public Health
Department of Maternal and Child Health
624 North Broadway
Baltimore, MD 21205
(301) 955-3384

MCHIP
MCJ-243306
10/01/88–09/30/91
Project Director(s):
Bernard Guyer, M.D., M.P.H.

The HHS Region III Childhood Injury Prevention Program (CHIPP-III) will assist the Title V directors in the Region III States and the District of Columbia to: (1) Assemble available injury-related data in order to estimate the geodemographic incidence of childhood injuries and the prevalence of injury-related disability for planning purposes; (2) foster the design and targeting of State- and community-based prevention initiatives; and (3) initiate and support coalition-building activities leading to the ongoing involvement and cooperation of State and local participation in childhood injury prevention activities.

Partnerships in Injury Prevention
Maryland Department of Health and Mental Hygiene
201 West Preston Street, Room 304A
Baltimore, MD 21201
(301) 225-5780

MCHIP
MCJ-243A07
10/01/90–09/30/95
Project Director(s):
Ellen R. Schmidt

The goal of the Partnerships in Injury Prevention (PIP) project is to reduce morbidity and mortality due to selected childhood injuries in four Maryland counties. The PIP project will: (1) Assist selected local health departments to develop and sustain childhood injury prevention programs including surveillance, community involvement, intervention, and evaluation; (2) use an organizational behavioral management (OBM) approach and a seven-step community-based model to help counties develop these programs; and (3) evaluate the effectiveness of providing varying levels of human and financial resources to selected counties in sustaining community-based childhood injury prevention programs.

Injury Prevention Implementation Incentive Grant: New England Network
Education Development Center, Inc.
55 Chapel Street
Newton, MA 02160
(617) 969-7100

MCHIP
MCJ-253841
10/01/87–09/30/91
Project Director(s):
Patricia J. Molloy, M.S.W.

This project is an adjunct to the New England (N.E.) Network to Prevent Childhood Injuries. The N.E. Network, formed in 1985, works with the region's six State Maternal and Child Health (MCH) directors to enhance each State's capacity to prevent childhood injury. In its second year, the network established the Institutionalization Task Force to assist each State in securing ongoing financial support for a permanent childhood injury prevention program. This project's goal is to implement the activities of the task force.

Parent Outreach Project
Wilder Foundation
919 Lafond Avenue
St. Paul, MN 55104
(612) 642-2015

MCHIP
MCJ-273020
10/01/87–09/30/91
Project Director(s):
Eugene S. Urbain, Ph.D.

The major goals of the Parent Outreach Project (POP) are to: (1) Develop and demonstrate a replicable, collaborative, interagency preventive intervention model utilizing existing professional casework services, community education, and community-based social support for a population at risk for potential child maltreatment; and (2) reduce the incidence of parent-child problems and child maltreatment and promote increased positive parent-child interactions in a population at risk for potential child maltreatment, through the application of the collaborative intervention model.

Burn Injury Prevention Program for Low-Income Families
New York State Department of Health
Injury Control Program
Corning Tower
Room 621
Albany, NY 12237
(518) 473-1143

MCHIP
MCJ-363002
10/01/87–09/30/91
Project Director(s):
Jeff Simon, M.S.

The overall goal of this community demonstration project in selected low-income and rural service areas of New York State is to reduce risks, morbidity, and mortality from fire, burns, and scald injuries by developing, implementing, and evaluating the proper installation and use of home safety devices and enforcement of building and fire codes. A secondary project goal is to develop a comprehensive community health education burn prevention and safety demonstration program for low-income populations that reduces burn injury risks.

Training EMTs in Primary Prevention of Childhood Injuries
New York State Department of Health
Empire State Plaza
Corning Tower, Room 621
Albany, NY 12237
(518) 473-1143

MCHIP
MCJ-363126
10/10/87–09/30/91
Project Director(s):
Susan Hardman

The overall goal of this project is to reduce morbidity and mortality from childhood home injuries caused by fires, scalds, falls, and poisonings in New York State. The project objectives are to: (1) Develop a training module on the primary prevention of childhood injuries related to falls, scalds, burns, and poisonings for emergency medical technicians (EMTs) to use in their communities; and (2) conduct a demonstration project in a target area by mobilizing the community resources of EMTs.

Oklahoma Pediatric Injury Control Project
Oklahoma State Department of Health
Maternal and Child Health Service
P.O. Box 53551
Oklahoma City, OK 73152
(405) 271-4471

MCHIP
MCJ-403235
10/01/87–06/30/91
Project Director(s):
M. Leigh Brown, R.N., J.D.

The goal of the statewide pediatric injury control project is the reduction of morbidity and mortality due to childhood injuries. The objectives of the project will specifically address the leading causes of childhood mortality in Oklahoma—motor vehicle unintentional injuries, submersions, and burns.

South Carolina Childhood Injury Reduction Project
South Carolina Department of Health
and Environmental Control
Division of Children's Health
2600 Bull Street
Columbia, SC 29201
(803) 737-4050

MCHIP
MCJ-453307
10/01/88–09/30/91
Project Director(s):
Mimi Jackson, R.N., M.S.

This project will assume leadership in bringing necessary data and agencies together to focus on the childhood injury problem. The long-term goal is to reduce fatal and nonfatal injuries sustained by children birth to 19 years of age in South Carolina. Although mortality due to injury is known, the magnitude and severity of nonfatal injury is not known because no system exists to report the occurrence of injury. A microcomputer-based, automated surveillance system will be developed using existing data sources, and a sampling method will be devised to include sources not routinely compiled. A coalition of agencies with interest in childhood injury will be formed to focus on the problem and to provide input into the development of the project.

Reduction of Childhood Accidental Injuries in Utah Students
Utah Department of Health
Family Health Services Division
288 North 1460 West
P.O. Box 16650
Salt Lake City, UT 84116-0650
(801) 538-6161

MCHIP
MCJ-493244
10/01/87–09/30/91
Project Director(s):
Peter van Dyck, M.D., M.P.H.

The goal of this project is to demonstrate a reduction in the frequency and the severity of school-related playground injuries to children. This goal will be achieved by making simple environmental modifications to the playgrounds. To maximize the effectiveness of this project, administrators, parents, local health department personnel, grounds keepers, PTAs, and other community groups will be involved.

Child Pedestrian Injury Prevention
Harborview Injury Prevention and Research Center
325 Ninth Avenue, ZX-10
Seattle, WA 98104
(206) 223-8388

MCHIP
MCJ-533500
10/01/87–09/30/91
Project Director(s):
Frederick P. Rivara, M.D., M.P.H.

This project's broad goal is to alter the manner in which our community thinks about and approaches pedestrian safety. We propose a 3-year effort aimed at decreasing morbidity and mortality from childhood pedestrian injuries, using four specific interventions: (1) School-based educational programs to train children in pedestrian safety appropriate to their developmental level; (2) a broad-based educational campaign employing mass media to instill individual and community responsibility for pedestrian safety; (3) enhanced police enforcement directed toward speeders and violators of the pedestrian's right-of-way; and (4) modification of environmental risk factors in high-risk areas.

Children with Special Health Needs

Early Childhood Intervention

Fragile Infant Special Care Program (Baby Moms)
San Francisco Department of Social Services
Family and Children's Division
P.O. Box 7988
San Francisco, CA 94120
(415) 383-2273

MCHIP
MCJ-065067
10/01/90–09/30/93
Project Director(s):
Don Cohon, Ph.D.

The Fragile Infant Special Care Program (Baby Moms), established in 1987, uses specialized foster homes to care for infants with problems ranging from drug withdrawal with mild sequelae to symptomatic AIDS. Due to lack of resources, it has not been possible to document the effectiveness of the program nor to systematically evaluate the infants' improvements. The goals of this project are to develop a comprehensive data base and case management system; carry out internal analyses of operations of the Baby Moms program model; and develop and distribute a manual for others to use in designing similar programs.

Watch Me Grow Demonstration Project
National Easter Seal Society
70 East Lake Street
Chicago, IL 60601
(312) 726-6200

MCHIP
MCJ-175062
10/01/90–09/30/93
Project Director(s):
Martha Ackerman

The goal of the Watch Me Grow Demonstration Project is to increase the monitoring of 0- to 3-year-olds who are at risk for developmental disabilities so that early identification and timely assessment and referral to appropriate early intervention services can be made in Ohio and nationwide. Objectives include: (1) Developing and implementing the family-centered, community-based Watch Me Grow program in 8 selected Easter Seal sites in Ohio; (2) developing and implementing a survey of 200 Ohio children identified as having abnormal scores; and (3) promoting implementation of the Watch Me Grow program in other States.

Project AIMS
University of Southern Maine
Human Services Development Institute
96 Falmouth Street
Portland, ME 04103
(207) 780-4430

MCHIP
MCU-233926
10/01/86–09/30/91
Project Director(s):
Susan Partridge, M.S.W., Ph.D.

Project AIMS works to strengthen the capacity of Maine's service system (including P.L. 99-457 efforts) to meet the emotional health needs of young children (birth to 5 years old) and their families. The project objectives are to: (1) Establish a multidisciplinary network of project associates; (2) develop and field-test an emotional health brief assessment tool for children birth to 5 years old; (3) recommend to the service network methods of conducting comprehensive psychosocial assessments of children/families with emotional difficulties; (4) strengthen treatment services which facilitate attachment, interaction, mastery, and support within families; and (5) disseminate products and methods statewide and nationally.

Maternal and Child Health Cooperative Agreement
Reginald S. Lourie Center for Infants and Young Children
11710 Hunters Lane
Rockville, MD 20852
(301) 984-4444

MCHIP
MCU-243927
10/01/86–09/30/91
Project Director(s):
Linda Gerson, Ph.D.

The goal of this project is to develop and implement comprehensive and family-centered approaches to early identification, assessment, and treatment of infants and young children who are at risk for or suffering from emotional and/or regulatory difficulties. To this end, the Regional Center for Infants and Young Children plans to: (1) Monitor types of families and children referred to and receiving services from an agency specializing in the early detection of emotional disorders or potential risk; (2) develop principles and technology to identify infants and young children/families at risk for psychosocial and developmental difficulties; (3) develop comprehensive, family-centered approaches to assessment and diagnosis; (4) develop prevention-oriented, family-centered approaches to intervention; (5) develop and disseminate technical assistance and training approaches; (6) engage State and local maternal and child health (MCH) agencies in the project; and (7) access multiple financial resources to support its efforts.

Early Intervention Collaborative Study: Preschool Phase
University of Massachusetts Medical School
Department of Pediatrics
55 Lake Avenue North
Worcester, MA 01655
(508) 856-3028

Research
MCJ-250583
04/01/89–12/31/92
Project Director(s):
Jack P. Shonkoff, M.D.

This 4-year study is a continuation (Phase II) of a nonexperimental longitudinal investigation of the development of 217 children with disabilities and their families after their transition from early intervention programs to preschool settings. The long-term objectives of this study are to examine the stability of effects of early intervention services (utilizing comprehensive data collected during Phase I) and to identify the predictors of subsequent child competence and family adaptation during the preschool period.

Nutrition Surveillance, Intervention, and Training in the Early Intervention Population
Massachusetts Department of Public Health
and the Shriver Center
150 Tremont Street, Fourth Floor
Boston, MA 02111
(617) 727-5822 or 642-0226

MCHIP
MCJ-255035
10/01/88–09/30/91
Project Director(s):
Cynthia Taft Bayerl, R.D., M.S.
Jacque Ries, R.D., M.P.H.

The goals of this project are to: (1) Collaborate with early intervention (EI) programs in the New England region to establish an ongoing nutrition service system that provides screening and assessment; (2) establish a central reporting system to determine the nutritional status of the nutritionally at-risk population; and (3) establish a system of screening, referral, and assessment to identify children in the EI program who are at nutritional risk. A permanent training program and resource manual will be incorporated into the orientation program for all EI providers and professionals.

Effects at Age Five of an Intervention Program for Low Birthweight Infants
Albert Einstein College of Medicine
Rose F. Kennedy Center, Room 820
1300 Morris Park Avenue
Bronx, NY 10461
(212) 430-2000

Research
MCJ-360593
05/01/90–04/30/92
Project Director(s):
Cecelia M. McCarton, M.D.

The Infant Health and Development Program (IHDP) is a multicenter, randomized, controlled trial to test the efficacy of an intervention to reduce the incidence of health and developmental problems among low birthweight (LBW) premature infants. This study will enable clinics to conduct assessments of cognitive development, behavioral competence, preschool readiness, and health status. Assessments of all low birthweight premature infants enrolled in the IHDP at age 5 will be conducted by blinded observers. Funds from The Robert Wood Johnson Foundation and the Pew Charitable Trust are supporting core activities including continued followup for health status, family functioning, and the use of child care services or other family-related or special education services.

Single Parents and Early Intervention Programs: Participation and Goodness of Fit
Philadelphia Child Guidance Clinic
Two Children's Center
34th Street and Civic Center Boulevard
Philadelphia, PA 19104
(215) 243-2704

Research
MCJ-420598
10/01/90–09/30/94
Project Director(s):
C. Wayne Jones, Ph.D.

The primary objective of this study is to identify the combinations of child, parent/family, and service delivery variables which predict parent involvement in early intervention programs (EIPs) for low-income, single-parent families who have a handicapped child (as defined by Part H of P.L. 99-457). A secondary objective is to identify whether parent involvement in EIPs, in combination with family characteristics, is predictive of parenting outcomes, such as parenting behavior, knowledge, satisfaction, and stress.

Early Identification of Hearing-Impaired Children
Utah State University
UMC 6580
Logan, UT 84322
(801) 750-2003

MCHIP
MCJ-495037
06/01/89–05/31/92
Project Director(s):
Karl R. White, Ph.D.

Working in conjunction with the Oregon Health Division and using the materials and expertise gained during the past 10 years in Utah, this project will develop, evaluate for cost-efficiency, and document the procedures necessary to implement a birth certificate-based screening program.

Promoting Success in Zero to Three Services:
A National Resource Center
National Center for Clinical Infant Programs
2000 14th Street, North
Suite 380
Arlington, VA 22201
(703) 528-4300

MCHIP
MCJ-115041
07/01/89–06/30/94
Project Director(s):
Eleanor S. Szanton, Ph.D.

The goal of this project is to improve systems of services for infants and toddlers with special health care needs and their families. The project will function as a national resource center on the needs of this special population. Over the 3-year funding period, the program will pursue two main objectives. The first is to identify and promote nationally examples of workable approaches to serving infants and toddlers with special health needs and their families. The second is to identify and promote community systems that use prevention approaches successfully so that they can be replicated nationwide.

Children with Special Health Needs

Family-Centered, Community-Based, Comprehensive Services

Alabama's Care Management Project
Alabama State Department of Education
Division of Rehabilitation and Crippled Children's Service
2129 East South Boulevard
Montgomery, AL 36111
(205) 792-0022

MCHIP
MCJ-015030
10/01/88–09/30/91
Project Director(s):
Glenna Graverson, R.N.

This project trains parents of older handicapped children to facilitate case management services to parents of special needs children by serving as "partners" to those parents and children eligible for services under P.L. 99-457. The "parent partners" (family care managers) will provide support to parents of young children with problems, serve as their advocates in helping them assume their role as primary caretakers for their children, and work closely with children with special health needs staff in determining the needs of the family and in ensuring the family's understanding of and cooperation with recommendations and with the individual family service plan.

Nutrition Care for the Child with Special Health Care Needs
University of Alabama at Birmingham
Sparks Center for Development and
Learning Disorders
P.O. Box 313
University Station
Birmingham, AL 35294
(205) 934-0803

Training
MCJ-009116
09/01/88–06/30/93
Project Director(s):
Harriet H. Cloud, M.S., R.D.

Nutrition for the Child with Special Health Care Needs is an intensive, 1-week course for multidisciplinary team members concerned with the nutritional needs of this population. It is taught at two different sites, with an overall goal of improving nutrition awareness and services for the child with special health care needs.

Family-Centered, Community-Based Care Coordination for Children with Special Health Care Needs in the Arkansas Delta
Arkansas Department of Human Services
Division of Economic and Medical Services
Children's Medical Services
P.O. Box 1437–Slot 526
Little Rock, AR 72203
(501) 682-8224

MCHIP
MCJ-055061
10/01/90–09/30/93
Project Director(s):
Nancy Church, R.N.

The goal of the project is to improve the health status of children with special health care needs in three of the most impoverished counties in the Arkansas Delta by providing culturally sensitive, family-centered care coordination in a community-based setting so that the children will receive all of the medical, nutritional, and socioeconomic services they need and their parents will be empowered to become their children's own best case managers.

Family-Centered, Community-Based Project
Arkansas Children's Medical Services
P.O. Box 1437
Slot 526
Little Rock, AR 72203
(501) 682-2277

MCHIP
MCJ-055018
10/01/87–09/30/91
Project Director(s):
Nancy Church, R.N.
Julia Furnis Oxner, R.N.

This project addresses the need to establish a regionalized system of community-based service centers to assist the families of children with special health care needs in coordinating and obtaining access to needed services. Strategies include instituting a multidisciplinary team to ensure coordination and service delivery through support of case planning, case management, referrals, and education of the client population and general public; and developing linkages between community service providers and the centrally located, more fully developed resources in Little Rock.

ACMS/Community-Based Care Coordination Project for CCS Children and Their Families in Los Angeles County
California Children's Services of Los Angeles County
2064 Marengo Street
Los Angeles, CA 90033
(213) 342-2279

MCHIP
MCJ-065020
10/01/87–12/31/90
Project Director(s):
Dale C. Garell, M.D.

The goals of this project are to: (1) Develop and implement an automated case management system (ACMS) in Los Angeles County to improve and enhance the existing California Children's Services (CCS) system; (2) establish a CCS community-based care coordinator program within Los Angeles County to coordinate and implement an individual service plan for children with special needs and their families; and (3) test the feasibility and desirability of these goals in Los Angeles County, California, and other States.

National Center on Parent Directed Family Resource Centers
Parents Helping Parents
535 Race Street, #220
San Jose, CA 95126
(408) 288-5010

MCHIP
MCJ-065069
10/01/90–09/30/93
Project Director(s):
Florene Stewart Poyadue

The overall goal of the project is to create a system for developing parent-to-parent family centers. The project will develop a series of "how to" manuals on the initiation, development, and establishment of a parent-helping-parent family resource center. The project will develop eight self-teaching packets on specific program components, hold a 5-day national workshop, provide internships, and provide ongoing consultation.

Strengthening the Nutrition Component of Community-Based Services for Children with Special Health Care Needs in California
Children's Hospital of Los Angeles
University Affiliated Program
4650 Sunset Boulevard
Los Angeles, CA 90027
(213) 669-2300

MCHIP
MCJ-065057
10/01/90–09/30/93
Project Director(s):
Marion Taylor-Baer

The overall goal of the project is to strengthen/integrate systems for delivering family-centered, community-based, coordinated nutrition services to children with special health care needs in California. The four major objectives are to: (1) Strengthen/coordinate community-based nutrition services to children with, or at risk for, special health care needs in at least 50 percent of the 50 California counties by 1993; (2) increase referrals from at least 50 percent of the 36 targeted tertiary California Children's Services special care centers to community-based nutrition resources (at least 50 percent) by 1993; (3) develop collaboration among key State agencies to establish policies related to the provision of coordinated, family-centered, community-based nutrition services for children with special health care needs by 1993; and (4) disseminate project information.

Leadership Training in Occupational Therapy
Colorado State University
Office of Sponsored Programs
Fort Collins, CO 80523
(303) 491-7567

Training
MCJ-009105
10/01/87–06/30/92
Project Director(s):
Elnora M. Gilfoyle, D.Sc.

This program integrates leadership skills and the use of technology as therapeutic media into graduate education programs to prepare occupational therapists with identified competencies needed to provide mother-child health care services in community-based settings. Occupational therapy services are implemented to enhance children's play and learning skills, and thus prepare them for independent living in today's environment. In addition, the program provides therapists with the knowledge, skills, and attitudes necessary to demonstrate the accountability of their therapeutic services through research.

Project CONNECT
University of Connecticut
Department of Pediatrics
Division of Child and Family Studies
309 Farmington Avenue, Sarm Hollow, Suite C-200
Farmington, CT 06030
(203) 679-1485

MCHIP
MCJ-095048
10/01/89–09/30/92
Project Director(s):
Mary Beth Bruder, Ph.D.

Project CONNECT will develop a model for a service delivery system of family-centered, community-based care for children with complex health needs and their families. The project will implement a demonstration model with approximately 24 families during the first year. This project will also develop and implement a training curriculum for families and service providers at both the hospital and community level. The curriculum content will include general principles of family-centered care, accessing services, case coordination/case management, funding and reimbursement, system level change/advocacy, and implementation of the standards developed by New England SERVE.

National Network for Children with Special Needs
Georgetown University Child Development Center
3800 Reservoir Road, N.W.
Bles Building, Room CG-52
Washington, DC 20007
(202) 687-8635

MCHIP
MCU-115042
07/01/89–06/30/94
Project Director(s):
Phyllis R. Magrab, Ph.D.

The goal of this project is to achieve comprehensive, coordinated, community-based services for children with special health care needs and their families through collaboration among public and private agencies and parents at all levels within the service delivery system. In order to reach this goal, the program will (1) develop a national network; (2) facilitate the development of national, regional, State, and community coalitions; (3) develop resources for States and communities; (4) provide technical assistance; (5) promote collaborative interagency planning at the Federal level; and (6) improve outreach to those individuals, agencies, and institutions needed to implement family-centered, community-based, coordinated care.

MCHIP Systems Development Project for Children with Special Health Care Needs
Federated States of Micronesia Department
of Human Resources
P.O. Box PS 70
Palikir Station
Palikir, Pohnpei, FM 96941
(691) 320-5263

MCHIP
MCJ-645029
10/01/88–09/30/91
Project Director(s):
Eliuel K. Pretrick, M.O., M.P.H.

The goals of this project are to: (1) Identify and analyze the handicapping conditions present in the Federated States of Micronesia; (2) introduce concepts of coordinated care services, family- and community-based networks, and case management services to the providers who care for children with special health care needs; (3) provide training for the development of communications systems and linkage networks among the agencies involved with caring for these children; and (4) consider mechanisms for the development of systems to enable the ongoing identification, monitoring, and treatment of children with special health care needs.

Systems Management for Children with Special Health Needs
Maternal Child Health Program
Department of Public Health and Social Services
Bureau of Community Health and Nursing Services
P.O. Box 2816
Agana, GU 96910
(671) 734-7110

MCHIP
MCJ-667032
10/01/90–09/30/93
Project Director(s):
Laurent Duenas

The goal of this project is to develop and implement, for children ages birth to 3 years who have special health needs, a territorywide system which will coordinate care providers to assure that services are family centered and linked with various other community-based resources. This system will facilitate the management of comprehensive health care services and seek to close identified gaps in health care services.

Medical Home Project
Hawaii Medical Association
1360 South Beretania
Honolulu, HI 96814
(808) 536-7702

MCHIP
MCJ-155078
10/01/90–09/30/93
Project Director(s):
Margo Peter, M.Ed.

The goals of this project are to: (1) Develop and demonstrate office-based models that assure comprehensive services through the medical home for all children, especially those served under Part H of P.L. 99-457; (2) promote effective linkages and coordination of care between the medical home and early intervention service providers through community forums; and (3) gather, develop, and disseminate throughout the Nation creative strategies that promote comprehensive care through the medical home.

Parent-Pediatric Partnerships: Strengthening Families to Make the Vulnerable Invincible
Hawaii Department of Health
Zero-to-Three Hawaii Project
1600 Kapiolani Boulevard, Suite 925
Honolulu, HI 96814
(808) 957-0066

MCHIP
MCJ-158902
10/01/89–09/30/94
Project Director(s):
Jean L. Stewart, M.A., M.P.H.

The goal of this project is to develop a demonstration model for providing comprehensive, multidisciplinary, interagency, family-centered, and community-based care for environmentally at-risk infants and toddlers in low-income, culturally diverse urban and rural settings. The project will develop an individualized family support plan for each family through a partnership between the family and the pediatrician. Specific objectives for the second project year primarily include the full implementation of services in two target areas. An extensive data base for future program evaluation will be developed. As the value of this demonstration model becomes increasingly obvious, a major thrust will be to develop strategies to ensure not only the continuation of services within the target areas, but the expansion of the project to other areas of the State that are currently underserved.

Indiana Parent Education Project
Indiana Parent Information Network
2107 East 65th Street
Indianapolis, IN 46220
(317) 257-8683

MCHIP
MCJ-185073
10/01/90–10/30/93
Project Director(s):
Donna Gore Olsen

The Indiana Parent Education Project will develop a parent information and education program that will assist parents of young children with special health care needs to be more effective caregivers, child advocates, and team members in meeting their children's health care needs. The primary goal of the program will be to enhance the ability of parents to assess their children's health care needs, to communicate those needs to the health care team, and to coordinate home and community health care.

CHSC Parent Partnership
University of Iowa
Child Health Specialty Clinics
239 University Hospital School
Iowa City, IA 52242
(319) 356-1118

MCHIP
MCJ-195025
10/01/88–09/30/91
Project Director(s):
Richard P. Nelson, M.D.

This project seeks to strengthen family-centered care for Iowa children with special health care needs by expanding parent participation in Child Health Specialty Clinics (CHSC) services development, by creating a statewide parent consultant network, and by enhancing community opportunities for parents to meet with each other and with professionals in a family-oriented experience. Program plans include an annual statewide issues forum; a regional parent consultant network composed of 2 parents from each of the 13 CHSC service regions; and family enrichment weekends designed to bring together parents and children for discussion, reflection, and recreation.

National Resource Center for Community-Based Systems of Services for Children with Special Health Care Needs and Their Families
University of Iowa
National Maternal and Child Health Resource Center
Boyd Law Building
Melrose and Byington
Iowa City, IA 52242
(319) 335-9067

MCHIP
MCJ-195040
07/01/89–06/30/94
Project Director(s):
Josephine Gittler, J.D.
John C. MacQueen, M.D.

The goal of the project is to generate support for developing community-based service systems and to increase and enhance the capability of individuals and groups to engage in such system development. This goal will be attained through the following objectives: (1) Make available and accessible a centralized resource for obtaining and exchanging information concerning community-based service systems; (2) make available and accessible needed education and training opportunities for individuals and groups with a key role to play in the development of community-based service systems; (3) assist in efforts to design and implement community-based service systems.

Leadership Development for Nurses in Early Intervention
University of Kentucky College of Nursing
760 Rose Street
Room 527
Lexington, KY 40536-0232
(606) 233-6687

MCHIP
MCJ-215052
10/01/89–09/30/92
Project Director(s):
Gwen Lee

The goal of this project is to enhance the capability of the health care delivery system in Department of Health and Human Services Regions IV, V, and VI to provide community-based systems of care for infants and toddlers by preparing community-based nurses and State nurse leaders working in maternal and child health and children with special health needs programs for their roles in implementing P.L. 99-457, Part H. The primary objective of this project is to enhance the competence of community-based nurses by developing a regionally focused, nationally relevant curriculum.

Parents in Partnership
Human Services Development Institute
University of Southern Maine
96 Falmouth Street
Portland, ME 04103
(207) 780-4430

MCHIP
MCJ-235068
10/01/90–09/30/93
Project Director(s):
John Hornstein

Parents in Partnership has two goals: (1) Provide a continuum of direct services, focusing on parent-led support groups for parents of young special needs children in Cumberland County; and (2) create a mechanism for learning from the parent support groups and disseminating to professionals a variety of educational materials and experiences designed to heighten their awareness of family needs, family-centered practices, and development-promoting psychosocial interventions.

National Center for Family-Centered Care
Association for the Care of Children's Health
7910 Woodmont Avenue
Suite 300
Bethesda, MD 20814
(301) 654-6549

MCHIP
MCJ-115039
07/01/89–6/30/94
Project Director(s):
Beverley H. Johnson

The goals of the National Center for Family-Centered Care are to promote implementation of a family-centered approach to care for children with special health care needs; to foster parent-professional collaboration at all levels of health care; and to document the effectiveness of a family-centered approach to care for children with special health care needs.

Project Copernicus: Model for Family-Centered Case Management for Children with Special Health Care Needs
Maryland State Department of Health
and Mental Hygiene
201 West Preston Street
Baltimore, MD 21201
(301) 225-5580

MCHIP
MCJ-245028
10/01/88–09/30/91
Project Director(s):
Judson Force, M.D.

The concept of family-centered care has emerged from the recognition that service delivery systems need to be more responsive to the choices made by families with children who have special health care needs. As the philosophy of family-centered care is embraced by parents and professionals, we face the challenge of applying these concepts to actual practice. The aim of Project Copernicus is to assist parents and professionals to develop and use family-centered care coordination activities. The project will develop, demonstrate, and evaluate training programs in family-centered care coordination, with target groups of professionals and families in urban, rural, and suburban areas of Maryland and Virginia.

Affiliated Children's Arthritis Centers of New England: A Family-Centered, Community-Based Regional Program
New England Medical Center
Department of Pediatrics
755 Washington Street
Box 286
Boston, MA 02111
(617) 956-5071

MCHIP
MCJ-255064
10/01/90–09/30/93
Project Director(s):
Jane G. Schaller, M.D.
Ilona S. Szer, M.D.

The purpose of this project is to strengthen the role of the community in the care of children with rheumatic diseases in New England. The project goals are to: (1) Improve the health status of children with rheumatic diseases in New England; (2) improve community-based care for children with rheumatic diseases in New England; (3) empower families as integral members of the health care team; and (4) improve educational programs, services, and support for children with rheumatic diseases.

CAPP National Parent Resource Center
Federation for Children with Special Needs
95 Berkeley Street
Suite 104
Boston, MA 02146
(617) 482-2915

MCHIP
MCJ-255038
07/01/89–06/30/94
Project Director(s):
Betsy Anderson

This project is designed to help parents acquire the skills and knowledge necessary to enable them to assume a greater role in caring for their children and to participate collaboratively with health professionals in program and policy formation. The project has framed three major goals: (1) To strengthen parent leadership capabilities through a system of technical assistance; (2) to expand the Collaboration Among Parents and Health Professionals (CAPP) regional system to coordinate with parent organizations, professional groups, and State health departments; and (3) to develop effective parent-professional liaisons at all levels of health care.

Coordinated Care and Case Management for Children with Special Health Needs
Massachusetts General Hospital
Department of Children's Services
Fruit Street
Boston, MA 02114
(617) 726-1885

Research
MCJ-250581
11/01/88–10/31/91
Project Director(s):
James M. Perrin, M.D.

This project investigates the effectiveness of coordinated, community-based case management services for children through a survey of families with a range of chronic conditions in States with and without case management services. The study's hypotheses are that children and families who receive case management services (compared to those controls who do not) will show: (1) Greater utilization of nonmedical and nonhospital services; (2) improved functional status as indicated by increased participation in age-appropriate community activities; and (3) improved psychological status.

New England SERVE: A Planning Network for Implementing Family-Centered, Community-Based Care
Massachusetts Health Research Institute
101 Tremont Street, Suite 812
Boston, MA 02108
(617) 574-9493

MCHIP
MCJ-255043
10/01/89–06/30/94
Project Director(s):
Susan G. Epstein, M.S.W.
Ann B. Taylor, Ed.D.

This project seeks to address three specific needs which must be met in order to facilitate successful implementation of the Surgeon General's National Agenda for Children with Special Health Needs. They are: (1) The need to build a broad base of support for family-centered, community-based care; (2) the need to implement standards of quality care in both public and private programs for children with special health needs; and (3) the need to increase access to health care financing, care coordination, and community-based services.

Project Linkages
Pathfinder Resources
Midtown Commons
Suite 105
2324 University Avenue West
St. Paul, MN 55114
(612) 647-6905

MCHIP
MCJ-275055
10/01/89–09/30/92
Project Director(s):
Georgianna Larson, R.N., M.P.H.

The goal of Project Linkages is to improve the quality of life and health, both physical and psychosocial, of children with asthma and their families through the development of community-based, family-centered programs effectively mobilizing local, regional, and State resources from public, private, and voluntary agencies. Project objectives are to: (1) Increase child/family/primary care provider understanding of disease management through a community-based clinic team approach; (2) increase child/family/primary care provider expertise in disease management through formal and informal education; and (3) facilitate third-party payer reimbursement for health promotion, community-based services for children with asthma and epilepsy.

SPRANS/MCHIP Exchange
Park Nicollet Medical Foundation
Midtown Commons
Suite 105
2324 University Avenue West
St. Paul, MN 55114
(612) 647-6905

MCHIP
MCJ-275054
10/01/89–06/30/94
Project Director(s):
William F. Henry, M.A.

The purpose of this project is to provide a national resource center for SPRANS/MCHIP grantees. The SPRANS Exchange assists States in developing and expanding family-centered, community-based systems of care through SPRANS/MCHIP project clearinghouse activities. These include technical assistance on product development and distribution, networking and information sharing, annual national workshops, and a product information data base. The SPRANS Exchange focuses on three levels of assistance to grantees, designed to decrease fragmentation and to improve the quality and accessibility of SPRANS achievements. These levels are: (1) SPRANS/MCHIP networking, (2) SPRANS product development, and (3) SPRANS/MCHB promotion.

Project Network: Meeting Nutrition Needs of Children and Adolescents with Special Needs Through Community-Based, Family-Centered, Culturally Competent Nutrition Services

Mississippi State Department of Health
P.O. Box 1700
2423 North State Street
Jackson, MS 39215-1700
(601) 960-7680

MCHIP
MCJ-285065
10/01/90–09/30/93
Project Director(s):
Teresa Carithers, R.D., M.H.S., L.D.

Project Network will: (1) Establish a statewide network of four well-trained field nutritionists to provide family support, consultation, and technical assistance to caregivers and clients; (2) obtain or develop and disseminate educational materials that are appropriate to the age, literacy, and culture of the target population; (3) more fully develop the Mississippi Interagency Nutrition Network; (4) develop and implement community-based experiences for nutrition/dietetic students and other health professionals; and (5) widely disseminate information regarding project organization and implementation and materials obtained or developed by the project throughout the State, region, and Nation.

Montana Project for Children with Special Health Care Needs

Montana Department of Health and Environmental Sciences
Cogswell Building, Room C314
Helena, MT 59620
(406) 444-4740

MCHIP
MCJ-305015
10/01/87–04/30/91
Project Director(s):
Sidney C. Pratt, M.D.

The overall goal of this project is to develop a replicable system of family-centered, community-based case management for children with special health care needs in a frontier State. Targeted communities must be under 20,000 in population and serving areas at least 50 miles from a level II facility. The project objectives are to: (1) Upgrade case management and assessment skills of local public health nurses; (2) develop family-centered, community-based case management programs that address the needs of the family and the child with special needs; and (3) develop community-based teams that empower families to actively participate in identifying and meeting educational, social, psychological, health, and financial needs for themselves and the child with special needs.

New Hampshire Family Support Network

New Hampshire Division of Public Health Services
6 Hazen Drive
Concord, NH 03301
(603) 271-4596

MCHIP
MCJ-335063
10/01/90–09/30/93
Project Director(s):
Jane M. Hybsch
Bev Parry

The purpose of the New Hampshire Family Support Network is to ensure that New Hampshire families whose children have special health care needs have the information and support necessary to provide the best possible care for their children at home, utilizing the resources of their local communities. Activities include providing information and referral services, developing a parent self-help handbook, training parent leaders, establishing a data bank to link families with these parent leaders, and fostering interagency collaboration.

Pathways to Understanding: Culturally Sensitive, Coordinated Care for Indian Children with Special Health Needs
Southwest Communication Resources, Inc.
P.O. Box 788
Bernalillo, NM 87004
(505) 867-3396

MCHIP
MCJ-355060
10/01/90–09/30/93
Project Director(s):
Randi S. Malach

This project seeks to develop and improve statewide systems of family-centered, culturally sensitive, community-based, coordinated care by: (1) Enhancing coordination between the New Mexico maternal and child health/children with special health needs agency and the P.L. 99-457, Part H, lead agency in order to develop a linked, statewide system of case management and community-based care that is culturally appropriate and accessible to Native American children and their families; (2) increasing health professionals' understanding of cultural barriers faced by Native American families and improving health professionals' knowledge of culturally appropriate methods for providing health care services to Native American children with special needs; and (3) increasing the effectiveness of SPRANS projects serving Native American children in other States by providing them with technical assistance that increases their knowledge of culturally appropriate services.

Families and Communities in Transition
SKIP of New York, Inc.
990 Second Avenue
Suite 1B
New York, NY 10022
(212) 421-9160

MCHIP
MCJ-365004
07/01/87–06/30/91
Project Director(s):
Kathy Schwaninger

The purpose of this project is to encourage and expand home care as an option for families of children with special health needs. Objectives include empowering families who choose home care with the necessary skills and knowledge to become their own effective case managers; creating a collaborative system between parents and professionals in planning and caring for children; and improving and expanding both current home health and other community service provisions for children and their families.

Partners in Health: Self-Help/Mutual Support for Culturally Diverse Children with Special Health Needs
New York State Department of Health and
Health Research, Inc.
P.O. Box 2077
Empire State Plaza
Albany, NY 12220
(518) 474-2749

MCHIP
MCJ-367034
10/01/90–09/30/93
Project Director(s):
Linda A. Randolph

The goal of this project is to develop and evaluate a program that will empower and strengthen culturally diverse families of children with special health needs so that they can enhance their capacity as caregivers. This will be accomplished by building a culturally competent partnership between case managers for children with special health needs and self-help/mutual support. This linkage will assist families in developing greater competency in accessing both formal and informal services and supports, decrease the necessity over time for case manager contact, and reduce family stress levels.

Demonstration Project to Develop a Pediatric Service Coordination Model
MetroHealth Medical Center
Department of Pediatrics
3395 Scranton Road, Quad 3041
Cleveland, OH 44109
(216) 459-3635

MCHIP
MCJ-395026
10/01/88–09/30/91
Project Director(s):
Lyn Cooper, B.S.N., M.A.

The goal of this project is to enable families to provide home-centered care for their special needs children, when home is the best option, by establishing a service delivery system. This system will: (1) Promote the availability and accessibility of comprehensive quality services that address physical, psychosocial, spiritual, and developmental needs; (2) encourage continuity and coordination of care among all components of the child's and family's interdisciplinary team; (3) promote communication among caregivers; and (4) be reimbursable, accountable, and responsive to changing needs.

Northwest REAP Project
Oregon Health Sciences University
Child Development and Rehabilitation Center
707 Southwest Gaines Road
Portland, OR 97207
(503) 494-4632

MCHIP
MCJ-415053
10/01/89–09/30/92
Project Director(s):
J. Albert Browder, M.D.
Joyce Munson-Davis, Ph.D.

The goal of the Northwest Realizing Environmental Access Potential (REAP) Project is to plan, develop, and implement a family-centered, community-based program to provide technological equipment to disabled individuals in the region. Objectives include provision of three interdependent components consisting of interdisciplinary assessment teams, an equipment loan program for families, and an urban/rural outreach followup system. Family advocacy, community resource linkages, interagency agreements and service plans, and undergraduate and postgraduate professional training in the family-oriented use of technology are project priorities.

Family-Centered, Community-Based Services for Children with Cancer
Children's Hospital of Philadelphia
Division of Oncology
34th and Civic Center Boulevard
Philadelphia, PA 19104
(215) 590-2249

MCHIP
MCJ-425027
10/01/88–09/30/91
Project Director(s):
Beverly J. Lange, M.D.

Traditionally, treatment of pediatric cancer has required high-technology, provider-intensive care, which is expensive and disrupts family life and the child's socialization and education. The goal of this project is to design alternative means of treatment by: (1) Moving the delivery of some high-technology care for children with cancer from a Level III hospital to the community and home; (2) providing community-based intervention for those children at risk for learning disabilities caused by cancer or its treatment; and (3) developing a community-based system of followup services for long-term survivors.

Family-Centered, Coordinated Early Intervention Systems for Navajo Children and Families
Utah State University
Early Intervention Research Institute
Logan, UT 84322-6580
(801) 750-3346

MCHIP
MCJ-497035
10/01/90–09/30/93
Project Director(s):
Richard N. Roberts, Ph.D.

The major goals for this project are as follows: (1) Improve the health and developmental status of young Navajo children with special health needs and decrease the infant mortality and morbidity in three locations in the Navajo Nation; (2) improve collaborative and planning efforts between Arizona, New Mexico, Utah, the Navajo Nation, and Federal agencies responsible for services on the Navajo Reservation; (3) augment and coordinate preservice and inservice training programs in support of demonstration programs; (4) develop and install an evaluation system that provides feedback on program quality, costs, and effects.

Improving Community-Based Services for Special Needs Children and Their Families in Rural Utah
Utah Department of Health
Family Health Services Division
288 North, 1460 West
P.O. Box 16650
Salt Lake City, UT 84116-0650
(801) 538-6161

MCHIP
MCJ-495049
10/01/89–09/30/92
Project Director(s):
Peter C. van Dyck, M.D., M.P.H.

The goal of the project is to improve the functioning of special needs children and their families by providing locally based, integrated planning and coordinated case management services in a rural area in Southern Utah. The program objectives are to: (l) Involve parents of special needs children in developing service plans for their children; (2) improve the implementation of service plans for children; (3) improve coordination of services to these children by local and tertiary care providers; and (4) improve the adequacy of services to these children by local and tertiary care providers. While maintaining current multidisciplinary clinic services, Children's Special Health Services will work through the local health department to place a nurse coordinator, a secretary, a social worker, and a trained parent advocate in the local community. This team will build upon existing local systems to improve the functional outcomes of the children.

National and Local Models of Paraprofessional Training and Service
Utah State University
Early Intervention Research Institute
Logan, UT 84322-6580
(801) 750-3346

MCHIP
MCJ-495051
10/01/89–09/30/92
Project Director(s):
Richard N. Roberts, Ph.D.

This project analyzes the effectiveness of paraprofessional trained home visitors who meet weekly with 50 families under the supervision of public health nurses in rural communities. Successful paraprofessional/professional partnerships provide States with an alternative solution to the problem of insufficient numbers of professionals to deliver services.

Family/Professional Collaboration
University of Vermont
Department of Social Work
499B Waterman Building
Burlington, VT 05405-0160
(802) 656-8800

MCHIP
MCJ-507036
10/01/90–09/30/93
Project Director(s):
Kathleen Kirk Bishop

Family/professional collaboration has been identified as a key component in implementing the family-centered, community-based, coordinated care called for by the Surgeon General and families and professionals in this country. The overall goal of the Family/Professional Collaboration project is to improve the health status of children with special health needs and their families through the promotion and facilitation of family/professional collaboration in all levels of planning, service delivery, and policymaking.

Sibling Support Project: Creating Peer Support and Educational Opportunities for Brothers and Sisters of Children with Special Health Needs
Children's Hospital and Medical Center
P.O. Box C-5371
Seattle, WA 98105
(206) 526-2131

MCHIP
MCJ-535077
10/01/90–09/30/93
Project Director(s):
Donald J. Meyer, M.Ed.

The Sibling Support Project is a unique approach to enhance related services at the local level for families of children with chronic illnesses and disabilities. The singular goal of the Sibling Support Project is to increase the number of peer support and educational opportunities throughout the United States.

Making It Work for Children with Special Health Care Needs: The Family, the Community, the State
W.G. Klingberg Center for Child Development
Department of Pediatrics/Child Development
West Virginia University Health Sciences Center
Morgantown, WV 26506
(304) 293-7331

MCHIP
MCJ-545058
10/01/90–09/30/93
Project Director(s):
Chet D. Johnson, M.D.
Sue Thompson

The goal of this project is to improve the overall system of health care delivery for children in West Virginia with special health needs. The project will: (1) Provide individualized family empowerment training with specific emphasis on skills in case management; (2) strengthen the Handicapped Children's Services System of case management; (3) provide coordinated, comprehensive medical and educational evaluations for children with special health care needs; (4) establish a movement recognizing parents as equal partners within the professional team; (5) enhance networking through a parent-provider interdisciplinary, interagency conference; (6) emphasize the development of a primary medical home for every child with special health care needs; (7) emphasize the role of the primary care physician as a member of the community team; (8) assure continuation of the project beyond the granting period; and (9) expand services to all children with special health care needs in West Virginia.

Diagnostic and Followup Project for Native American Children in Wisconsin with Special Health Care Needs
University of Wisconsin at Madison
Statewide Genetics Services Network
Medical Genetics, Room 104
445 Henry Mall
Madison, WI 53706
(608) 262-1006

MCHIP
MCJ-555024
10/01/88–09/30/91
Project Director(s):
Raymond Kessel, Ph.D.

This project is part of an ongoing effort to identify and address issues related to developmental disabilities among Native American children in Wisconsin to assure that proper diagnostic and followup services are provided to this population. Tribes, State and local agencies, and volunteer organizations are involved in a collaborative effort to design and establish a long-term, community-based, high quality program in each tribal community in Wisconsin to serve the special health care needs of Native American children. The two main goals of the project are to: (1) Become an integral part of the tribal service systems, and (2) improve those systems in such a way that they address both the needs of developmentally disabled children and the issues related to the prevention of disabilities.

Children with Special Health Needs

Chronic Illness, Disabling Conditions

Center for Developmental and Learning Disorders Training
University of Alabama at Birmingham
Alabama UAP
P.O. Box 313
UAB Station
Birmingham, AL 35294
(205) 934-5471

Training
MCJ-019143
07/01/90–06/30/95
Project Director(s):
Craig Ramey, Ph.D.

This project prepares professionals to provide health and health-related care from an interdisciplinary perspective to children with multiple handicaps and mental retardation. Training is directed toward long-term graduate and postgraduate students with career interests in maternal and child health, and is comprised of orientations, workshops, conferences, seminars, courses, and continuing education programs at both preservice and inservice levels. The center serves the five-State region of Alabama, Florida, Georgia, Mississippi, and Tennessee.

Medical Genetics in Prevention of Mental Retardation and Birth Defects
University of Alabama at Birmingham
UAB Station
Birmingham, AL 35294
(205) 934-4983

Training
MCJ-000905
07/01/88–06/30/93
Project Director(s):
Sara C. Finley, M.D.

This project, utilizing the resources of a comprehensive medical genetics program, provides training for future leaders in the field of medical genetics. The program is based in a tertiary medical center, and graduate students and postdoctoral fellows receive didactic and laboratory instruction in cytogenetics, clinical genetics, biochemical genetics, and molecular genetics. The goals of this program include providing a cadre of leaders who possess state-of-the-art knowledge and who can implement, direct, and interpret genetic diagnostic laboratory procedures. The program will strive to reach maternal and child health populations by providing instruction in the professional schools at UAB and continuing education programs for primary care providers throughout the State.

Pediatric Pulmonary Center
University of Alabama at Birmingham
UAB Station
Birmingham, AL 35294
(205) 939-9583

Training
MCJ-019161
07/01/90–06/30/95
Project Director(s):
Raymond K. Lyrene, M.D.

The purpose of the Pediatric Pulmonary Center at the University of Alabama at Birmingham is to train health professionals who are knowledgeable in the area of children's respiratory diseases. Both long-term and short-term training is available in the disciplines of nutrition, nursing, social work, respiratory care, psychology, and medicine. The ultimate goal of this training is to develop leaders in the health care professions who are capable of improving community-based care for children with respiratory diseases through service, education of health care workers, and assistance to both public and private health care providers.

Biochemical Genetics Laboratory
University of California at San Diego
Department of Pediatrics
M-009-A
La Jolla, CA 92093-0609
(619) 534-4150

Training
MCJ-004007
07/01/88–06/30/93
Project Director(s):
William Nyhan, M.D., Ph.D.

This project is a demonstration laboratory devoted to the diagnosis and management of patients with inborn errors of metabolism, and serves as a referral center for patients and for laboratory samples from patients. It serves broadly in the training of health professionals in the use of state-of-the-art methods.

Comprehensive Training of Pediatric Dental Residents
University of Southern California
School of Dentistry, Pediatric Dentistry
University Park MC 0641
Room 304-A
Los Angeles, CA 90089-0641
(213) 743-7265

Training
MCJ-009098
07/01/87–06/30/92
Project Director(s):
Ronald Johnson, D.D.S.

This training program involves a 3-year structured curriculum that provides basic scientific information as well as an intensive clinical experience necessary to prepare the student to deliver exemplary care for children, adolescents, and individuals who are developmentally disabled, medically compromised, or handicapped. In addition, the curriculum stresses the role of research in promoting knowledge and improving the level of dental care to the patient. A thesis based on original clinical or laboratory research is one of the requirements for graduation from the program. A strong emphasis is placed on recognizing and meeting the dental needs of the community and on interaction with medical and nonmedical disciplines to optimize the level of care delivery for patients.

Interdisciplinary Training in Chronic Disabilities, UCLA
Neuropsychiatric Institute
760 Westwood Plaza
Los Angeles, CA 90024
(213) 825-0395

Training
MCJ-069144
07/01/89–06/30/94
Project Director(s):
James Q. Simmons III, M.D.

The University of California at Los Angeles (UCLA) University Affiliated Program (UAP) Interdisciplinary Training Program provides interdisciplinary training for 30 core leadership trainees each year at the graduate and postdoctoral level in 10 different disciplines. Its focus is on children and families with chronic disabilities, with a special emphasis on psychosocial adaptation. Leadership trainees participate in a core didactic curriculum in chronic disabilities, an interdisciplinary clinical team, seminars in their disciplines, and a schedule of community observations. UAP faculty operate or coordinate seven interdisciplinary clinical services for trainees, including three on the UCLA medical campus and four in the community.

Medical Genetics: Diagnosis and Management
University of California at San Francisco
Department of Pediatrics
Division of Medical Genetics, Box 0748
San Francisco, CA 94143
(415) 476-2981

Training
MCJ-000445
07/01/84–06/30/93
Project Director(s):
Charles Epstein, M.D.

This project provides service and training in medical genetics, with particular emphasis on comprehensive genetic counseling, the diagnosis and management of human abnormalities of genetic origin, and the development and implementation of state-of-the-art approaches to genetic diagnosis and treatment. The project has been established because of the need to make training available in many aspects of medical genetics and to develop a system for making high quality genetic services available to a broad consumer community.

National Center for Case Management and Automation
County of Los Angeles, California Children Services
University of Southern California
University Affiliated Program
University of Southern California School of Medicine
1975 Zonal Avenue, KAM-110
Los Angeles, CA 90033
(213) 224-7031

MCHIP
MCJ-067027
10/01/90–09/30/93
Project Director(s):
Dale C. Garell, M.D.

The goal of the National Center for Case Management and Automation is to improve the health and well-being of children with special health needs and their families by providing technical assistance and consultation on the use of case management and automation services to States, local counties, and community-based programs, and to improve care coordination and communication between the health care system and those who provide services to these children and their families. Activities include developing a common format for an individual family service plan, suitable for automation, that can be used as part of a national data base; and developing a resource information bank of existing case management programs and automation for MCH populations.

Training for Nursing Leadership in Pediatric Primary and Chronic Care
University of California, San Francisco
Department of Family Health Care Nursing
School of Nursing
San Francisco, CA 94143
(415) 476-4663

Training
MCJ-000935
07/01/88–06/30/93
Project Director(s):
Bonnie Holaday, R.N., D.N.S.

The pediatric nursing faculty of the University of California is in the process of further developing a specialty track, entitled "Clinical Nurse Specialist in Pediatric Primary Chronic Care," which will: (1) Implement a nursing curriculum focused on health maintenance, health promotion, and disease prevention in children and adolescents, with a component on handicapping conditions, chronic illnesses, and developmental disabilities; (2) prepare students with skills in case management; (3) incorporate theoretical, clinical, and leadership components from Title V and other MCH health programs; and (4) prepare students for effective participation in interdisciplinary approaches to the planning and delivery of health care services for children and families.

University Affiliated Training: Multihandicapped Children
Children's Hospital of Los Angeles
Center for Child Development and
Developmental Disorders
4650 Sunset Boulevard, Box 53
Los Angeles, CA 90027
(213) 669-2300

Training
MCJ-069145
07/01/89–06/30/94
Project Director(s):
Warren E. Cohen, M.D.

The purpose of this training project is to improve the lives of children with disabling conditions and special health care needs by providing interdisciplinary training to the professionals who serve them. Training project goals are accomplished through a professional training program based in a clinical center, numerous community-based clinical activities, continuing education seminars and workshops, consultative and technical assistance services to community agencies, and ongoing research efforts.

Nutrition Project for Children with Handicaps
Colorado Department of Health
Handicapped Children's Program/
Children with Special Needs
4210 East 11th Avenue
Denver, CO 80220
(303) 331-8359

MCHIP
MCJ-085034
10/01/88–09/30/91
Project Director(s):
Daniel J. Gossert, M.A., M.P.H.

An estimated 73 percent of the children in the Colorado Handicapped Children's Program have nutritional problems which may interfere with optimal growth and development and may increase the debilitating effects of their handicap or chronic illness. Prior to the implementation of the Nutrition Project for Children with Special Needs, there was no systematic way to find and offer nutrition intervention to children in the Colorado Handicapped Children's Program. The goal of the Nutrition Project for Children with Special Needs is to develop a replicable nutrition intervention system to reduce or prevent the debilitating effects of poor nutrition in children with handicapping conditions and chronic illness.

Regional Biomedical and Treatment Program
University of Colorado
Health Sciences Center
4200 East Ninth Avenue
Denver, CO 80262
(303) 270-7301

Training
MCJ-000252
07/01/88–06/30/93
Project Director(s):
Stephen I. Goodman, M.D.

The purpose of this program is to improve regional and national diagnosis and treatment of inborn errors of metabolism by providing state-of-the-art laboratory facilities for diagnosis and treatment, an interdisciplinary clinic to evaluate and treat affected children, and training facilities for physicians and other health workers.

Interdisciplinary Doctoral Training Program in Communication Disorders
Howard University
School of Communications
2400 Sixth Street, N.W.
Washington, DC 20059
(202) 636-7690

Training
MCJ-002011
07/01/88–06/30/92
Project Director(s):
Orlando L. Taylor, Ph.D.

The Howard University Interdisciplinary Doctoral Training Program in Communication Disorders provides preservice and inservice leadership training to individuals who wish to acquire knowledge and competencies to assume or enhance academic, administrative, clinical, or research positions in communication disorders.

Interdisciplinary Graduate Training in Developmental Disabilities
Georgetown University
Child Development Center
3800 Reservoir Road, N.W.
Washington, DC 20007
(202) 687-8635

Training
MCJ-119146
07/01/89–06/30/94
Project Director(s):
Nina Scribanu, M.D.

The mission of the Georgetown Child Development Center, a University Affiliated Program (UAP), is to improve the quality of life for children and the families of children with mental retardation, multiple handicaps, and other special health care needs, and to reduce the incidence of these conditions in our society. The UAP provides interdisciplinary training of health-related professionals and prepares them for leadership in a variety of clinical, training, and consultative roles in delivering, planning, or implementing family-centered, community-based, coordinated care for children with special health care needs. Trainees participate in a core curriculum, in case management seminars, as members of interdisciplinary teams, in community agency clinical services, and in teaching and clinical research activities.

Child Development Center and Multidisciplinary Training Facility
University of Miami School of Medicine (D820)
Mailman Center for Child Development
Miami, FL 33101
(305) 547-6635

Training
MCJ-129147
07/01/89–06/30/94
Project Director(s):
Robert S. Stempfel, M.D.

The purpose of this project is to increase the quality and quantity of services to children with or at risk for handicapping conditions or special health care needs through the development of model programs of interdisciplinary training, service, research, dissemination, and technical assistance in collaboration with local and State maternal and child health-related agencies. Activities to accomplish this purpose include preservice training and continuing education; parent and family education; collaboration with State Departments of Health and Rehabilitative Services and Education; technical assistance to legislative, advisory, and advocacy bodies; and research aimed at development of model service delivery systems.

Pediatric Pulmonary Center
University of Florida
Department of Pediatrics
J. Hillis Miller Health Center
Box J-296
Gainesville, FL 32610
(904) 392-4458

Training
MCJ-129162
07/01/90–06/30/95
Project Director(s):
Arlene A. Stecenko, M.D.

The purpose of this project is to provide exemplary health care for a segment of the large and increasing number of children with chronic and acute respiratory disease and to provide interdisciplinary training to alleviate the shortage of health professionals required to meet the needs of this patient population. Educational programs include interdisciplinary inpatient and outpatient management experiences, didactic curriculums, and a variety of other activities tailored to the students' interests and goals. Center faculty provide services in the form of consultative clinics and continuing education programs. Both faculty and students are active in research, patient and community education, and development of tools for patient management.

Children's Medical Services Case Management Project
Georgia Department of Human Resources
2600 Skyland Drive, N.E.
Lower Level
Atlanta, GA 30319
(404) 320-0547

MCHIP
MCJ-135059
10/01/90–09/30/93
Project Director(s):
Linnette Jackson-Hunt, M.D., M.P.H.

This project will design and implement a pilot model system of case management to provide family-centered, community-based services to eligible children with complex medical conditions. This model will also provide coordination of and access to other public health programs. Appropriate social and financial support services through Medicaid and the Department of Family and Children's Services will be coordinated, and family support groups will be identified and included in the care plan in cooperation with local parents. Community-based support services will be developed through interagency collaboration and involvement of local providers. The feasibility of expanding this pilot model to other rural areas will be explored.

Maternal and Child Health Graduate Training in Physical Therapy
Emory University School of Medicine
Department of Rehabilitation Medicine
Division of Physical Therapy
1441 Clifton Road, N.E.
Atlanta, GA 30322
(404) 727-6138

Training
MCJ-000989
07/01/87–06/30/92
Project Director(s):
Pamela A. Catlin, Ed.D., P.T.

The purpose of this project is to train professionally qualified physical therapists at the advanced master's degree level in maternal and child health care. The program emphasis is to develop an interdisciplinary teaching approach that stresses prevention of disease and disability through early identification of and intervention with health problems. Management of mobility/orthopedic problems is a primary focus of the four-semester program of study.

National Resource Center for Childhood Rheumatic Diseases
Arthritis Foundation
American Juvenile Arthritis Organization
1314 Spring Street, N.W.
Atlanta, GA 30309
(404) 872-7100

MCHIP
MCJ-135075
10/01/90–09/30/93
Project Director(s):
Daniel J. Lovell, M.D., M.P.H.

The goals of the National Resource Center for Childhood Rheumatic Diseases are to develop an infrastructure for dissemination of information and delivery of services; develop an electronic information system; and expand community-based, family-centered services to empower children and families. Activities include developing parent/professional teams to deliver community-based programs and developing training curriculums and guidelines to implement a school advocacy program, a parent-to-parent network, and a training program for health professionals.

Leadership Training for Pacific Island Nurses
University of Guam
UOG Station
Mangilao, GU 96923
(671) 734-2921, ext. 3458

Training
MCJ-009100
07/01/87–06/30/91
Project Director(s):
Anne W. Rohweder, R.N., M.N.

This project aims to increase nurse leadership skills, particularly in the area of maternal and child health, throughout the Micronesian islands by recruiting, enrolling, and graduating up to 15 nurses from the Micronesian islands from the University of Guam Second Step Baccalaureate in Nursing Program.

Children's Support Systems
La Rabida Children's Hospital and Research Center
East 65th at Lake Michigan
Chicago, IL 60649
(312) 363-6700

MCHIP
MCJ-175076
10/01/90–09/30/93
Project Director(s):
Arthur F. Kohrman, M.D.

This demonstration project will implement and evaluate a family-centered, community-based outreach model for the support of families caring for children with a wide range of chronic illness and disabilities in low-income urban communities. A team approach will be employed that integrates the strength of the family and the professional's expertise with the informal support, maturity, and street sense offered by the community worker. The program will be implemented in a two-tiered design utilizing professional staff and community workers.

Educational Behavioral Program for PKU
University of Illinois at Chicago
College of Allied Health Professions
1919 West Taylor Street, MC/517
Chicago, IL 60612
(312) 996-8055

Research
MCJ-170575
11/01/88–10/31/91
Project Director(s):
Kimberlee Michals, R.D., Ph.D.

This study examines the effects of an experimental program which uses both an educational and a behavioral approach to accomplish dietary self-management by child and adolescent phenylketonuria (PKU) patients.

Training for the Care of the Handicapped Child
Indiana University School of Medicine
Riley Child Development Center
James Whitcomb Riley Hospital for Children
702 Barnhill Drive
Indianapolis, IN 46202-5225
(317) 274-8167

Training
MCJ-189131
07/01/89–06/30/94
Project Director(s):
John D. Rau, M.D.

The fundamental elements of program planning for children with special needs and for the education/training of health and related professionals must effectively relate (1) client/family needs; (2) professionals prepared to respond to those needs; and (3) access of clients to such professionals so as to match needs and providers. The Riley Child Development Center seeks to relate these elements in a conceptual fashion useful both for individual clients and for populations of children with similar special needs (e.g., mental retardation and other long-term disabilities).

Cytogenetics Technologist Training
University of Iowa
Division of Medical Genetics
Department of Pediatrics
Iowa City, IA 52242
(319) 356-3877

Training
MCJ-009123
10/01/88–06/30/93
Project Director(s):
Shivanand R. Patil, Ph.D.

There is an acute need for broadly trained technologists in the Midwest. We have established the 9-month, full-time Medical Cytogenetics Program at the University of Iowa to provide training in clinical cytogenetics in a geographically widespread genetic service network. We are extending our student recruitment throughout the Great Plains Regional Genetics Network by enlisting lab directors from the network to provide application information and interview prospective students. In addition, some students will complete the practicum at other centers. Our program will serve as a model for others in the country and has generated immense interest in other networks.

Pediatric Dentistry Training in Care of Handicapped Children
University of Iowa
College of Dentistry
Department of Pediatric Dentistry
Iowa City, IA 52242
(319) 335-7478

Training
MCJ-000347
07/01/87–06/30/92
Project Director(s):
Jimmy Pinkham, B.S., D.D.S., M.S.

This project strives to ensure that participating students get exceptional training in recognizing the need for and being able to deliver specialist care that fulfills the oral health needs of chronically impaired and handicapped children (and young adults) or other children with special needs. The curriculum is designed to provide a comprehensive range of clinic, hospital, community, and research activities in an integrated multidisciplinary setting. The financial support of our trainees has allowed for recruitment of some of the best available entering pediatric dentistry graduate students from a national pool. Once on campus, these candidates are expected to grow because of faculty strength, wealth of university resources, clinical facilities, and superior multidisciplinary collaborations within the tertiary health science center here.

University Affiliated Program
University of Kansas Medical Center
39th and Rainbow Boulevard
Kansas City, KS 66103
(913) 588-5900

Training
MCJ-209148
07/01/89–06/30/94
Project Director(s):
Joseph G. Hollowell, Jr., M.D.

The purpose of the University Affiliated Program is to provide (1) interdisciplinary training of professionals for leadership roles, (2) continuing education activities addressing regional and national priorities related to children with special health care needs and their families, and (3) health care systems development via interagency collaboration.

Children with Special Health Care Needs–Shriners Hospitals for Crippled Children Collaboration Project
Kentucky Commission for Handicapped Children
982 Eastern Parkway
Louisville, KY 40217
(502) 588-3264 or (813) 281-8163

MCHIP
MCJ-217030
10/01/90–09/30/93
Project Director(s):
William D. Minix
Jack Hoard

This project will develop, implement, and evaluate three models of collaboration between State children with special health care needs (CSHCN) programs in the four primary States of Ohio, Kentucky, Tennessee, and South Carolina and Shriners Hospitals for Crippled Children units located in Cincinnati, Ohio; Lexington, Kentucky; and Greenville, South Carolina. These models will be designed to enhance access to care, improve service coordination, and increase service utilization of State CSHCN agencies and Shriners Hospitals on behalf of children and their families.

Intravenous Antibiotic Therapy in Cystic Fibrosis: Home Versus Hospital
Tulane University School of Medicine
1430 Tulane Avenue
New Orleans, LA 70112
(504) 588-5601

Research
MCJ-220556
05/01/87-10/31/90
Project Director(s):
William W. Waring, M.D.

The purpose of this study is to compare two treatment locations—hospital and hospital/home—for use of intravenous antibiotics on patients who have cystic fibrosis and who experience acute pulmonary exacerbations. The study compares the safety, efficacy, cost, and psychosocial effects of the two places of treatment.

Louisiana Pediatric Pulmonary Center
Tulane University School of Medicine
1430 Tulane Avenue
New Orleans, LA 70112
(504) 588-5601

Training
MCJ-229163
07/01/90-06/30/95
Project Director(s):
Robert C. Beckerman, M.D.

The goal of the Louisiana Pediatric Pulmonary Center (LPPC) is to reduce the morbidity and mortality of pulmonary diseases through childhood and young adulthood. Although centered in medical schools in New Orleans and Shreveport, the program has close ties with selected regional hospitals. Faculty and students represent many different disciplines, including medicine, nursing, social work, nutrition, and respiratory therapy. By exposing students to exemplary care, discipline-specific curriculums superimposed on a nonspecific core of information, a requirement for research, and participation in an advocacy effort for improved care for children with pulmonary disease, the faculty of the LPPC expects to develop leaders in each of the several fields.

National MCH Resource Center for Ensuring Adequate Preparation of Providers of Care
Children's Hospital
200 Henry Clay Avenue
New Orleans, LA 70118
(504) 899-9511, ext. 438

MCHIP
MCJ-225047
10/01/89-06/30/94
Project Director(s):
A. Joanne Gates, M.D., M.B.A.

The goal of this project is to establish a national center to assist States in ensuring adequate preparation of providers of care for children with complex special health needs. The center will demonstrate effective approaches to preparing care providers of these children; assist agencies and organizations in developing and coordinating systems of community-based care; and assist States in developing standards for quality assurance in care delivery to these children. Project activities will include conducting orientations in selected States, selecting and preparing a core team in each State to implement a plan to provide technical assistance and consultation, and developing a newsletter and resource library.

UAP Training Program in Mental Retardation
Johns Hopkins University School of Medicine
720 Rutland Avenue
Baltimore, MD 21205
(301) 550-9483

Training
MCJ-249149
07/01/90–06/30/95
Project Director(s):
Gary W. Goldstein, M.D.

The Kennedy Institute at Johns Hopkins University provides exemplary interdisciplinary clinical services, research, training, and community outreach programs so that individuals with brain disorders can participate as fully as possible in family, school, and community life. The training program focuses on the preparation of leaders in the field who will have a positive impact on the lives of these individuals and their families.

OT/PT Sc.D. Program in Therapeutic Studies
Boston University
881 Commonwealth Avenue
Boston, MA 02215
(617) 353-2727 or 353-4365

Training
MCJ-000901
07/01/87–06/30/92
Project Director(s):
Anne Henderson, Ph.D.

The interdisciplinary doctoral program prepares occupational therapists and physical therapists for leadership positions in advanced practice and research with children or prepares them to teach pediatric content in entry level and advanced professional graduate programs. A current project expands the program to include a specialization in occupational therapy services for chronically ill children and their families.

Parent-Focused Intervention to Reduce Pain During Procedures
Trustees of Health and Hospitals of the City of Boston
Division of Developmental and Behavioral Pediatrics
Boston City Hospital, 217 Talbot
818 Harrison Avenue
Boston, MA 02118
(617) 534-4235 or 534-4232

Research
MCJ-250602
10/01/90–09/30/92
Project Director(s):
Howard C. Bauchner, M.D.

The purpose of this study is to determine if a simple, parent-focused intervention can reduce the child's pain during common invasive procedures, reduce parental anxiety, and improve the success of the procedure. All children less than 3 years of age who are accompanied by a parent to the emergency room at the Boston City Hospital, and who undergo venipuncture or intravenous cannulation, will be eligible. The intervention will consist of a series of written and verbal instructions to parents on how they can help their child cope with the invasive procedure.

Training in Mental Retardation
Massachusetts General Hospital/
Eunice K. Shriver Center
200 Trapelo Road
Waltham, MA 02154
(617) 642-0238

Training
MCJ-259151
07/01/89–06/30/94
Project Director(s):
Philip R. Reilly, J.D., M.D.

The purpose of the Shriver Center University Affiliated Program is to improve services to children who have or are at risk for special health care needs. It accomplishes this purpose through interdisciplinary training, exemplary service, technical assistance, information dissemination, and service-related research.

University Affiliated Program
Children's Hospital of Boston
Fegan 10
300 Longwood Avenue
Boston, MA 02115
(617) 735-6509

Training
MCJ-259150
07/01/90–06/30/95
Project Director(s):
Allen Crocker, M.D.

This developmental evaluation clinic/child study center is devoted to the concerns of young persons with mental retardation, other developmental handicaps, chronic illnesses, and/or genetic diseases. Activities include advocacy for young persons with mental retardation or other conditions which impinge on development; strategic, interdisciplinary, preservice education for students; diagnostic assessment, therapeutic program planning, and followup services for children (and some adults) who are in particular need of developmental assistance; high-quality inservice and continuing education to workers in the field; parent training and public education; technical assistance for relevant programs; and research aimed at improving knowledge and insights.

Fellowship Program in Dental Care for Handicapped Children
University of Michigan
School of Dentistry
1011 North University Avenue
Ann Arbor, MI 18109-1078
(313) 764-1523

Training
MCJ-000243
07/01/87–06/30/92
Project Director(s):
Richard E. Corpron, D.D.S., M.S., Ph.D.

This project is a training program which prepares dentists for leadership roles in administration, teaching, research, and services in dental health programs for normal and handicapped children. The program offers both an M.S. in pediatric dentistry and a dual degree program (M.S./M.P.H.) in pediatric dentistry and dental public health. The pediatric dentistry program integrates the didactic and the clinical with research training, while the dual degree program enables trainees to receive broad training in both disciplines by training individuals in a clinical discipline with experience in formulation and funding of dental health programs for normal and handicapped children. In addition, continuing education programs related to improving the dental treatment of normal and handicapped children are offered each year.

Meyer Rehabilitation Interdisciplinary Training Program
University of Nebraska
Meyer Rehabilitation Institute
600 South 42nd Street
Omaha, NE 68198
(402) 559-5233

Training
MCJ-319152
07/01/90–06/30/95
Project Director(s):
Bruce A. Buehler, M.D.

This project provides community- and center-based interdisciplinary training to graduate students in 11 disciplines. The program addresses the critical health care needs of Nebraskans while at the same time providing leadership training at the preprofessional and continuing education levels. Programs and materials developed at Meyer Rehabilitation Institute are disseminated nationally and regionally.

Rural Partnership for Children
University of Nebraska Medical Center
Department of Pediatrics
600 South 42nd Street
Omaha, NE 68198-2165
(402) 559-6009

MCHIP
MCJ-318717
10/01/90–09/30/95
Project Director(s):
Jaime L. Frias, M.D.

Children with special health care needs living in rural Nebraska lack access to comprehensive coordinated pediatric services. This is particularly true for rural children with ongoing health problems who have actual or potential chronic diseases but may not be identified or identified early enough to allow for early intervention. The 5-year Rural Partnership for Children project will: (1) Improve access to pediatric care for rural children with chronic and recurrent medical conditions who live in northwest Nebraska; (2) improve the coordination of health, education, and social services to rural children in northwest Nebraska with special health care needs; and (3) improve the quality of health care services provided to all rural children in northwest Nebraska.

Pediatric Pulmonary Center
University of New Mexico
Department of Pediatrics
2701 Frontier, N.E.
Albuquerque, NM 87131
(505) 277-5551

Training
MCJ-359164
07/01/90–06/30/95
Project Director(s):
Shirley Murphy, M.D.

The purpose of the University of New Mexico Pediatric Pulmonary Center is to prepare students to identify, prevent, and respond to the unique needs of children with pulmonary disease, their families, and communities in the largely rural and ethnically diverse Southwest region. A solid core of unidisciplinary and interdisciplinary pediatric pulmonary education, coupled with extensive applied experiences in inpatient and outpatient clinical, home, community, agency, and legislative settings, will be provided with supervision from a well-prepared faculty. The major emphasis of the program will be on synthesis of concepts from health systems, social medicine, epidemiology, research, and health policy, with major time committed to the application of these principles in implementing change in health care delivery.

Self Management Program for Severely Asthmatic Children's Rural Medicine
University of New Mexico School of Medicine
Department of Pediatrics
2701 Frontier, N.E.
Albuquerque, NM 87131
(505) 277-5551

Research
MCJ-350594
05/01/90–04/30/93
Project Director(s):
Shirley Murphy, M.D.

The University of New Mexico Pediatric Pulmonary Program (UNM–PPP) and Children's Medical Services (CMS) of New Mexico join together to evaluate the effects of a new statewide program to enhance identification, referral, and provision of care to rural families of children with moderately severe to severe asthma. Because of New Mexico's large rural and heavily Hispanic population, it is an ideal model to determine effective methods for rural case management, self-management educational programs, and effective tertiary to primary care delivery collaboration. The specific aim of this project is to determine if comprehensive medical care (CMC) plus an educational self-management program for rural children and their families will have an impact on asthma morbidity, as well as on cost and family adaptation.

Pediatric Pulmonary Center
Mount Sinai School of Medicine
1 Gustave L. Levy Place
Box 1202
New York, NY 10029
(212) 241-7788

Training
MCJ-369165
07/01/90–06/30/95
Project Director(s):
Meyer Kattan, M.D.

The purpose of the pediatric pulmonary center is to improve community-based care for children with chronic respiratory disease by providing interdisciplinary training of professional personnel and by working together with schools and community-based health care providers. Activities to achieve these objectives include continuing education programs for health care providers, workshops for patients and parents, case management services, and research activities aimed at improving the health of children with pulmonary diseases.

Social Work Training in Maternal and Child Health Care
Syracuse University
School of Social Work
Brockway Hall
Syracuse, NY 13244-6350
(315) 443-5583

Training
MCJ-002036
07/01/89–06/30/92
Project Director(s):
Claire S. Rudolph, M.S.W., Ph.D.

The purpose of the Social Work Training in Maternal and Child Health Care is to improve the quality and effectiveness of health care and supportive service delivery for children, adolescents with special needs, and their families. The program provides graduate training in social work, leading to the M.S.W. degree, linking the educational program with maternal and child health in local departments of public health, local school programs for children with special needs, the Regional Perinatal Program at SUNY Health Sciences Center in Syracuse, and the University of Rochester Pediatric Pulmonary Center at Strong Memorial Hospital in Rochester. Activities to achieve the program goal include a 2-year, 60-credit hour graduate program in social work, which includes a second year subspecialty in maternal and child health, and regional workshops in special topics of national significance to disseminate knowledge and experience.

University Affiliated Program
Albert Einstein College of Medicine
Rose F. Kennedy Center
1410 Pelham Parkway South
Bronx, NY 10461
(212) 430-2440

Training
MCJ-369153
07/01/90–06/30/95
Project Director(s):
Herbert J. Cohen, M.D.

The purpose of this University Affiliated Program is to provide interdisciplinary training in an exemplary service setting and to prepare future leaders for the field of developmental disabilities. Shorter term training is also provided to prepare health and allied health care professionals to better serve children and adolescents with developmental disabilities and special needs. The emphasis is on quality care and case management, while helping others to improve the service system through model program development, technical assistance, research, and dissemination.

University Affiliated Program Interdisciplinary Training
Westchester County Medical Center
Mental Retardation Institute
216 Cedarwood Hall
Valhalla, NY 10595-1689
(914) 285-8170

Training
MCJ-369029
07/01/90–06/30/95
Project Director(s):
William M. Levinson, M.D.

The overall goals for this project include providing interdisciplinary training and continuing education to a wide range of professionals, and providing exemplary services as a basis for training activities. The interdisciplinary training program is based on a comprehensive curriculum, participation in interdisciplinary and disciplinary clinical services, and individual training plans. Followup data on trainees show that the majority enter either administrative/program or clinical service positions. Other accomplishments have occurred in the areas of exemplary service models, technical assistance and dissemination, consultations, and faculty presentations.

University of Rochester Pediatric Pulmonary Center
University of Rochester School of Medicine
Box 667, University Medical Center
601 Elmwood Avenue
Rochester, NY 14642
(716) 275-2464

Training
MCJ-369071
07/01/90–06/30/95
Project Director(s):
John G. Brooks, M.D.

The University of Rochester Pediatric Pulmonary Center is committed to improving the quality of life for children with lung disease. It provides long-term interdisciplinary training and research; demonstrates exemplary care; and promotes systems of accessible, coordinated, comprehensive, family-centered, community-based care for children with respiratory disease. Activities include an interdisciplinary core curriculum, teaching clinics, materials development, preservice and continuing professional education, collaboration with families or other caregivers, research, information dissemination, and efforts to promote systems change.

Clinical Center for the Study of Development and Learning
University of North Carolina at Chapel Hill
CDL/BSRC, CB #7255
Chapel Hill, NC 27599-7255
(919) 966-1020

Training
MCJ-379154
07/01/90–06/30/95
Project Director(s):
Melvin D. Levine, M.D.

The purpose of the Clinical Center for the Study of Development and Learning is to improve community-based services for children with mental retardation, chronic illnesses, and other developmental disabilities by providing interdisciplinary training of professional personnel in the context of community-based educational and health care systems. Activities aimed at achieving these goals include graduate preservice and postgraduate education, continuing education programs for persons in health care and related professions, case management services, and research activities focused on the amelioration and prevention of developmental disabilities.

Appalachian Regional Program for Juvenile Chronic Disease
Children's Hospital Medical Center
Special Treatment Center
Elland and Bethesda Avenues
Cincinnati, OH 45229-2899
(513) 559-4676

MCHIP
MCJ-395033
10/01/88–09/30/91
Project Director(s):
Daniel J. Lovell, M.D., M.P.H.

This project addresses the identification and management of rheumatic and other chronic childhood diseases in a poverty-stricken, rural, and predominantly Appalachian population. With the cooperation of three universities in two States, and the Kentucky Commission for Handicapped Children, the project will seek to improve the health status of children with chronic diseases by developing secondary level medical care in three rural regions of Kentucky for children with rheumatic diseases and developing secondary level medical care in three rural regions of Kentucky for children with chronic diseases. A comprehensive, community-based, family-centered program will be implemented.

Center for Inherited Disorders of Energy Metabolism
Case Western Reserve University
School of Medicine
Rainbow Babies and Children's Hospital
2074 Abington Road
Cleveland, OH 44106
(216) 844-1286

Training
MCJ-009122
10/01/88–06/30/93
Project Director(s):
Douglas S. Kerr, M.D., Ph.D.

This center addresses the need for advanced professional training and clinical diagnostic services for evaluation and treatment of infants and children who suffer from a group of inherited diseases affecting energy production from metabolism of carbohydrate and fat. These disorders may be associated with mental retardation, muscle weakness, heart disease, and/or sudden infant death syndrome. The goals of the program are to provide advanced training for professionals with career interests in inherited metabolic disorders, to make comprehensive biochemical laboratory diagnostic services available for affected patients, to educate practitioners about recognition and treatment of these disorders, and to facilitate research to improve future diagnosis and treatment of these conditions.

Mental Retardation Training
Ohio State University
Nisonger Center
1581 Dodd Drive
Columbus, OH 43210-1296
(614) 292-8365

Training
MCJ-399155
07/01/89–06/30/94
Project Director(s):
Eric G. Handler, M.D., M.P.H.

The Nisonger Center is one of 58 University Affiliated Programs (UAPs) connected with universities across the United States to train students at their terminal degree level in developmental disabilities. The focus is on high-level academic training and practical experience in service, research, and continuing education on this and related populations. At The Nisonger Center, we see ourselves as training empirically oriented clinicians and clinical researchers to join the more than 100,000 former UAP trainees who form much of the leadership in this country's work force on developmental disabilities.

University Affiliated Cincinnati Center for Developmental Disorders
University of Cincinnati
Pavilion Building
Elland and Bethesda Avenues
Cincinnati, OH 45229
(513) 559-4688

Training
MCJ-399156
07/01/90–06/30/95
Project Director(s):
Jack H. Rubinstein, M.D.

The University Affiliated Cincinnati Center for Developmental Disorders, now in its 33rd year, has a strong clinical service base which provides the foundation for the interdisciplinary training of health and health-related professionals in the diagnosis, treatment, and management of children and adolescents with developmental disabilities and other chronic handicapping conditions. In addition to providing a wide range of experiences which develop disciplinary and interdisciplinary skills, the project provides a variety of experiences to develop knowledge and skills related to case management/care coordination, health care systems, research, and other relevant topics in order to develop knowledge and behaviors which will impact on the delivery of services. Specialized preservice training programs and continuing education are provided in areas such as genetic counseling for clinical nurse specialists and the nutritional needs of children with chronic illnesses/handicaps.

Family Support Project
Oklahoma State Department of Health
1000 Northeast 10
Oklahoma City, OK 73117-1299
(405) 271-4471

MCHIP
MCJ-405003
07/01/87–06/30/91
Project Director(s):
Leigh Brown, J.D., M.P.H.

This project seeks to increase support to children with special health needs by addressing the lack of formal support due to fragmentary services in local communities and the lack of identification and utilization of informal support. Project objectives are to: (1) Facilitate local community groups to address formal support system services needs; (2) enable volunteer parents to visit other families in their communities, thereby enhancing informal support systems; and (3) establish a grassroots network of families and community groups across the State.

Training Program in Communication Disorders
University of Oklahoma
Health Sciences Center
Department of Communication Disorders
P.O. Box 26901
Oklahoma City, OK 73190
(405) 271-4214

Training
MCJ-000235
07/01/89–06/30/92
Project Director(s):
Glenda J. Ochsner, Ph.D.

By means of interdepartmental planning and implementation through the Departments of Otorhinolaryngology, Pediatrics, and Communication Disorders, the overall objective of the project is to provide training and experience in interdisciplinary settings to develop those competencies, skills, and attitudes required for effective performance in the team approach to evaluation and management of the child with communication disorders. Training is provided to graduate students in audiology and speech pathology; resident physicians in pediatrics, otorhinolaryngology, and neurology; medical students; and social work interns.

OHSU Interdisciplinary Training Project in MR/DD
Oregon Health Sciences University
Child Development and Rehabilitation Center
P.O. Box 574
Portland, OR 97207
(503) 279-8317

Training
MCJ-419157
07/01/89–06/30/94
Project Director(s):
Christopher P. S. Williams, M.D.

The purpose of this project is to enhance the quality of life of persons who are handicapped or health impaired and their families through interdisciplinary training of professionals for leadership roles in serving this population. Its objectives include developing and implementing leadership curriculum for trainees representing 15 professional disciplines; providing an integrated network of exemplary clinical services that are family centered and responsive to the needs of such children and their families; providing training, technical assistance, and consultation to the community to strengthen community-based quality care; collaborating with major State and Federal agencies serving this population; and conducting research focused on prevention and intervention relative to the population.

Development of Standards for Health Care of Infants, Children, and Adolescents with Craniofacial Disorders
American Cleft Palate-Craniofacial Association
1218 Grandview Avenue
Pittsburgh, PA 15211
(402) 498-6680

MCHIP
MCJ-425074
10/01/90–09/30/93
Project Director(s):
Betty Jane W. Philips, Ed.D.

This project aims to promote improvement in the quality of health care services provided for infants, children, and adolescents who have craniofacial anomalies by: (1) Defining the scope of services necessary for these children; (2) defining standards of practice for surgical, dental, pediatric, genetic, speech pathology, audiology, otolaryngology, nursing, and psychosocial services for these children; (3) disseminating these standards to professionals, parents, agencies providing third-party reimbursement, and institutions preparing students for professions that may provide care for these children; and (4) providing continuing education programs on these standards of health care for parents, agencies, professionals, and health claims reviewers at State and local levels.

Project Caring: Primary Care Physicians Caring for Low-Income Children with Special Health Needs
Western Pennsylvania Caring Foundation, Inc.
500 Wood Street, Suite 600
Pittsburgh, PA 15222
(412) 645-6202

MCHIP
MCJ-428308
10/01/89–09/30/94
Project Director(s):
Charles P. LaVallee

In this program, project staff will work with the Pennsylvania Department of Health to establish a model for a statewide program designed to provide coordinated, family-centered, community-based care for chronically ill children. The project aims to provide physicians with the resources necessary to guide the care of a chronically ill child and to give families of chronically ill children the information and support they need to interact effectively with all caregivers. Program activities will include conducting a prevalence survey to determine the parameters of the target population with respect to chronic illness and disability; performing an assessment of primary care physicians in western Pennsylvania with respect to educational needs, awareness of services, and level of knowledge; and providing a continuing medical education program.

Development of Pediatric Pulmonary Care Personnel
University of Puerto Rico
G.P.O. Box 365067
San Juan, PR 00936-5067
(809) 763-4966

Training
MCJ-000950
07/01/90–06/30/95
Project Director(s):
Pedro Mayol, M.D.

The pediatric pulmonary center operates under the philosophy of quality patient care management within an interdisciplinary framework while simultaneously training professionals in these concepts. Our goals are directed to education and training, patient and community services, and research activities.

Audiology and Speech Training
Vanderbilt University School of Medicine
1114 19th Avenue South
Nashville, TN 37212
(615) 320-5353

Training
MCJ-000217
07/01/84–06/30/92
Project Director(s):
Fred H. Bess, Ph.D.

This project is designed to train personnel at the master's and Ph.D. levels in speech-language pathology and audiology. The objective is to produce highly qualified professionals who are capable of serving children with communicative handicaps and their families. Special emphasis is placed on increasing the numbers of minorities within the field of communication disorders.

Boling Center for Developmental Disabilities
University of Tennessee at Memphis
711 Jefferson Avenue
Memphis, TN 38105
(901) 528-6512

Training
MCJ-479158
07/01/89–06/30/94
Project Director(s):
Gerald S. Golden, M.D.

The goal of this project is to train individuals who will be equipped to assume leadership roles in maternal and child health and related programs. Specific objectives are fulfilled through the provision of advanced disciplinary, multidisciplinary, and interdisciplinary training. Each student is provided with core clinical and didactic experiences, both center-based and within community programs. Advanced trainees also receive training in administration and research.

An Evaluation of a Health Care System to Enhance Medical Self-Management and School Participation of Children with Rheumatic Disease
Texas Children's Hospital
Pediatric Rheumatology Center
P.O. Box 20269
Houston, TX 77030
(713) 798-2929

MCHIP
MCJ-485070
10/01/90–09/30/93
Project Director(s):
Karyl S. Barron, M.D.

A model health care system has been designed to maximize school participation (including academic achievement, extracurricular activities, and physical education) and autonomous age-appropriate self-care and pain management behaviors of children with rheumatic diseases. The system will: (1) Decrease by 20 percent the mean number of school absences and increase the amount of physical education participation; (2) increase the percentage of school personnel (e.g., teachers, nurses, therapists, and counselors) who are adequately prepared to manage chronically ill children in the classroom; and (3) increase the percentage of medical self-care and pain management behaviors performed by the child.

Baylor Laboratory Training Program
Baylor College of Medicine
1 Baylor Plaza, S-921
Houston, TX 77030
(713) 798-5820

Training
MCJ-009121
10/01/88–06/30/93
Project Director(s):
Edward R.B. McCabe, M.D., Ph.D.

The Baylor Laboratory Training Program provides training in the use of molecular genetic techniques in the diagnosis of genetic disease. Trainees include graduate students, medical students, postdoctoral fellows (including two supported by this grant), scientists on sabbatical leave, and visiting scientists. An annual 2-day workshop for 100 participants (physicians, genetic counselors, nurses, genetics clinic personnel, clinical laboratory personnel, and representatives of government agencies and community organizations) provides an introduction to state-of-the-art molecular genetic diagnosis. The faculty provide diagnosis and management of rare genetic disorders. The laboratories are refining and developing molecular genetic diagnostic techniques to improve their reliability, efficiency, cost-effectiveness, and utility.

Training of Speech-Language Pathologists
Our Lady of the Lake University at San Antonio
411 Southwest 24th Street
San Antonio, TX 78207-4666
(512) 434-6711, ext. 415

Training
MCJ-009099
07/01/87–06/30/92
Project Director(s):
Anthony Salvatore, Ph.D.

This project provides financial assistance to qualified persons interested in working with children, their mothers, and other family members with communication disorders. The ultimate objectives are to increase the number of qualified speech and language pathologists, and to increase the number of persons qualified to identify and habilitate communication disorders in minority populations.

University Affiliated Center Training Project
University of Texas Southwestern Medical Center
at Dallas
5325 Harry Hines Boulevard
Dallas, TX 75235
(214) 688-3563

Training
MCJ-002000
07/01/85–11/30/90
Project Director(s):
Charles M. Ginsburg, M.D.

The University Affiliated Center's activities include inservice and preservice training, development of model projects, technical assistance, research, and dissemination. These activities further its mission of improving the quality of life for children with developmental disabilities or chronic illnesses and their families. Responsiveness to national, State and local issues enhance the Center's effectiveness.

Children and Adolescents with Special Health Care Needs: Family-Centered Nursing Graduate Specialty
University of Washington
Parent and Child Nursing Department
SC-74
Seattle, WA 98195
(206) 685-7444

Training
MCJ-000909
07/01/84–06/30/93
Project Director(s):
Diane Magyary, R.N., Ph.D.

This training program is designed to prepare nurses at the graduate level for specialization and leadership roles related to the health care of children and adolescents with special health care needs and their families. A specialty curriculum within a 5-quarter program of study will be provided which leads to a master of nursing degree in the School of Nursing. The training program will also impact nurses in doctoral and other master's programs of study in selected theoretical, clinical, and research knowledge related to children and adolescents with special health care needs. Financial assistance and research opportunities will also be provided. Nursing faculty will function as resources for enhancement of Title V and related programs by providing continuing education, consultation, clinical practice demonstrations, and evaluation, as well as engaging in research and collaborative activities.

Comprehensive Training in Mental Retardation and Other Handicapping Conditions

University of Washington
Child Development and Mental Retardation Center
WJ-10
Clinical Training Unit
Seattle, WA 98195
(206) 545-1350

Training
MCJ-539159
07/01/90–06/30/95
Project Director(s):
Clifford J. Sells, M.D., M.P.H.

The Comprehensive Training in Mental Retardation and Other Handicapping Conditions project based at the Clinical Training Unit at the Child Development and Mental Retardation Center is dedicated to providing interdisciplinary training programs which ensure that professional personnel are available to serve children with developmental disabilities and their families. A variety of center- and community-based programs provide the arena for training based on exemplary services.

Pediatric Pulmonary Training Center

University of Washington
Seattle, WA 98195
(206) 543-3200

Training
MCJ-539167
07/01/90–06/30/95
Project Director(s):
Gregory J. Redding, M.D.

The purpose of the Pediatric Pulmonary Training Center at the University of Washington in Seattle is to train experts and leaders in medicine, nursing, nutrition, social work, and respiratory therapy, who will provide and teach exemplary comprehensive care for children with pulmonary disorders while emphasizing family-centered, community-based care techniques and resource utilization. Graduates from each discipline will learn to conduct clinical and basic research concerning topics involving lung biology and the prevention, diagnosis, and treatment of lung disease in children. These training objectives are accomplished by didactic and clinical curriculums provided by core faculty in each discipline, in conjunction with graduate classes.

Interdisciplinary Education and Training of Physical Therapists

University of Wisconsin at Madison
Department of Therapeutic Science
2120 Medical Sciences Center
1300 University Avenue
Madison, WI 53706
(608) 262-0653

Training
MCJ-009102
10/01/87–06/30/92
Project Director(s):
Mary Schneider, Ph.D., O.T.R.

The primary purpose of this project is to educate and train pediatric occupational and physical therapists to provide exemplary service, research, and leadership in dealing with handicapped children and their families. Five trainees per year, supported by MCH funding, receive education and training in the context of the M.S. in therapeutic science degree program at the University of Wisconsin at Madison. The graduate program is an interdisciplinary program with a strong focus on pediatric content and research/evaluation skills. Faculty and graduate students engage in collaborative research that results in publications, papers, and continuing education activities.

Pediatric Pulmonary Center
University of Wisconsin at Madison
Department of Pediatrics
H4/432 Clinical Sciences Center
600 Highland Avenue
Madison, WI 53792
(608) 263-8555

Training
MCJ-559072
07/01/90–06/30/95
Project Director(s):
Elaine Mischler, M.D.

The University of Wisconsin at Madison Pediatric Pulmonary Center serves as a center of excellence in the interdisciplinary training of students in medicine, nursing, social work, nutrition, pharmacy, and respiratory therapy, in the care of children and families with chronic pulmonary disease, and in service, outreach, and research activities. Students are trained to be leaders in their field with significant understanding of health care systems and transitions in care, and a mandate to support and participate in community-based, family-centered, coordinated care. A core curriculum, which includes a two-credit interdisciplinary graduate course, leadership activities, a health care system miniseries, and many community-based activities, serves as the focus of the educational program.

Waisman Center University Affiliated Program
University of Wisconsin at Madison
Waisman Center on Mental Retardation
and Human Development
1500 Highland Avenue
Madison, WI 53705
(608) 263-7108

Training
MCJ-559160
07/01/89–06/30/94
Project Director(s):
Raymond Chun, Ph.D.

The mission of the Waisman Center University Affiliated Program (UAP) is to improve the lives of persons with chronic handicapping conditions and their families. In order to do this, the primary goal of the UAP is to provide interdisciplinary training for professionals who will serve persons with handicaps and their families. Other goals include the provision of exemplary clinical/educational services to persons with chronic handicapping conditions, the sharing of the resources of the Waisman Center through outreach activities, and the conduct of research related to human development and chronic handicapping conditions.

Children with Special Health Needs

Technology Dependent, Medically Fragile

High-Tech Home Care for Children with Chronic Health Conditions
University of Kentucky
College of Nursing
Health Sciences Learning Center
760 Rose Street
Lexington, KY 40536-0232
(606) 233-8084 or 257-5190

Research
MCJ-210577
10/01/89–09/30/91
Project Director(s):
Juanita W. Fleming, Ph.D.
Barbara Teague, R.N., M.S.N., C.P.N.A.

The objective of this study is to create a data base that will aid in further describing technology-dependent children being cared for in their homes. Specific aims are to: (1) Identify selected demographic characteristics of technology-dependent children and their families; (2) define home care of technology-dependent children in terms of consumption of resources; (3) test selected hypotheses regarding the effects of the illness of these children on their families; and (4) provide the means for these data to be used by others in the development of recommendations for nursing practice relating to the care of technology-dependent children and their families. Thirteen cities in the United States will serve as areas from which data will be collected. Using structured interviews, data will be obtained from parents receiving services from private and public home health agencies.

Model for Home and Community Care for Children Who Are Technology Assisted
Coordinating Center for Home and Community Care
8258 Veteran's Highway
P.O. Box 613
Millersville, MD 21108
(301) 987-1048

MCHIP
MCJ-245023
10/01/87–12/31/90
Project Director(s):
Joanne Kaufman, R.N., M.S.

This project develops a model for public/private sector collaboration in financing and case managing home care for technology-assisted children. The project also develops a methodology for educating professionals in case management for family-centered care; identifies and analyzes alternatives to hospitalization; provides family-centered case management services to over 300 Maryland children funded by Medicaid or third-party payers; and publishes monographs on family-centered case management.

State Census of Technology-Dependent Children
Children's Hospital
300 Longwood Avenue
Boston, MA 02115
(617) 735-6714

Research
MCJ-250590
10/01/89–09/30/91
Project Director(s):
Judith S. Palfrey, M.D.

This study will be a census of all children defined as depending on extraordinary nursing services on a daily basis. Because this study will be longitudinal, we will be able to trace the prevalence of these conditions over time and look at changes within device use or in specific diseases, as well as changes in the etiologies of medical dependency. These data should be useful for program planning purposes as well as for tracking preventable causes of long-term disability.

Technology-Dependent Children's Services
Ken-Crest Centers
1 Plymouth Meeting, Room 620
Plymouth Meeting, PA 19462
(215) 844-4620

MCHIP
MCJ-428305
10/01/89–09/30/94
Project Director(s):
Mary Ellen Caffrey, Ph.D.

This project has added pediatric and nursing components to an existing early intervention program so that it can accommodate technology-dependent children. The center uses a coordinated approach to provide medical services, under which an individual pediatric service plan (IPSP) is developed for each child. Target children receive daily developmental programming. The project also features a parent training and advocacy component that aims to teach parents how to deal more effectively with their children's special medical and developmental needs.

Peabody Developmental Intervention Model for Technology-Assisted and Chronically Ill Infants and Families
Vanderbilt University
Box 328, Peabody
Nashville, TN 37203
(615) 322-2249

MCHIP
MCJ-475072
10/01/90–09/30/93
Project Director(s):
Samuel L. Odom, Ph.D.

The purpose of this project is to design and evaluate a collaborative model of developmental intervention for technology-assisted and chronically ill infants and young children (birth through 2 years of age) who receive home health care services. The goals are to: (1) Improve the developmental status of children with developmental delays and maintain the status of those children who are not currently experiencing delays (i.e., at-risk children); (2) involve the family and home health care providers in planning and providing developmental intervention activities; and (3) design, evaluate, and disseminate materials that could be used by home health care providers, developmental specialists, and families in the provision of developmental intervention activities for technology-assisted, chronically ill infants and young children.

Children with Special Health Needs

Cooley's Anemia, Thalassemia

Thalassemia Screening and Education Program
Association of Asian/Pacific
Community Health Organizations
310 Eighth Street, Suite 310
Oakland, CA 94607
(415) 272-9536

Genetics
MCJ-061009
10/01/88–09/30/91
Project Director(s):
Laurin Mayeno
Sylvia Harada

The goal of this project is to increase access to thalassemia screening, counseling, and education services for Southeast Asian refugee patients at Association of Asian/Pacific Community Health Organizations (AAPCHO) centers. Project activities include disseminating and replicating a model for thalassemia screening, counseling, and education services within the primary care setting. The project objectives include screening prenatal and premarital patients and their family members at AAPCHO centers, determining the prevalence of thalassemia trait among prenatal and premarital patients at AAPCHO centers, providing counseling for thalassemia trait carriers and their family members, and increasing awareness of the cultural practices and special needs of Asian immigrants and refugees among health professionals and paraprofessionals.

Comprehensive Hereditary Anemia Program for Hawaii
University of Hawaii
J.A. Burns School of Medicine
Medical Genetics Services
1310 Punahou Street
Honolulu, HI 96826
(808) 948-6834 or 956-6872

Genetics
MCJ-151002
10/01/85–09/30/92
Project Director(s):
Yujen Edward Hsia, M.D.

This project aims to (1) detect heterozygotes at risk for the lethal or handicapping inherited anemias in Southeast Asians; (2) help affected patients for whom preventive treatment may minimize the consequences of the disease; (3) identify couples at risk for affected offspring to offer them genetic counseling and fetal testing; (4) gain clinical experience in managing these diseases, and document their response to treatment; (5) improve the health services provided to at-risk populations; and (6) optimize screening protocols for heterozygotes by efficient use of currently available techniques and by development of accurate and efficient screening techniques.

Provision of Services to Children with Thalassemia Major
Children's Hospital
Developmental Evaluation Center
300 Longwood Avenue
Boston, MA 02115
(617) 735-6509

Genetics
MCJ-251005
07/01/82–06/30/91
Project Director(s):
Allen C. Crocker, M.D.

The mission of the New England Thalassemia Program is to improve the quality of treatment for patients with thalassemia. Our goals are to: (1) Disseminate information about thalassemia and provide community education; (2) identify all patients and carriers in the Region I area; (3) provide comprehensive medical care for Region I thalassemia patients; (4) provide services to promote optimal quality of life; (5) address challenges in providing services to the high-risk Southeast Asian refugee population; and (6) participate in and enhance the implementation of clinical research.

South Cove Thalassemia Screening, Education, and Counseling Program
South Cove Community Health Center
885 Washington Street
Boston, MA 02111
(617) 482-7555

Genetics
MCJ-251004
10/01/87–03/31/91
Project Director(s):
Rosalinda Ott, M.D.

The goals of this project are to: (1) Provide counseling, education, and support for thalassemia patients or those at risk for the trait to reduce incidence of the disease; (2) increase identification of thalassemia in patients through blood tests; and (3) increase patient and community awareness of the disease and its control through individual and community educational efforts. The objectives of the project are to: (1) Develop and use a protocol to screen patients at risk; (2) perform blood tests according to protocol to screen and identify patients with thalassemia; (3) provide genetic counseling and health education for patients who have been identified with the trait; and (4) make the community aware of thalassemia and the program at South Cove through health education and promotion efforts.

New York State Cooley's Anemia Program
New York State Department of Health and
Health Research, Inc.
Wadsworth Center for Laboratories and Research
Empire State Plaza
P.O. Box 509, Room E275
Albany, NY 12201-0509
(518) 473-9830

Genetics
MCJ-361007
10/01/82–09/30/91
Project Director(s):
Ann M. Willey, Ph.D.

The New York State Cooley's Anemia Program addresses two problems: (1) Families with a child with Cooley's anemia have difficulty finding adequate medical care because of the specialized nature of the treatment, and (2) many children with Cooley's anemia in the United States are born to unsuspecting parents even though the carrier state can be readily identified. One goal of the program is to provide optimal care for patients with Cooley's anemia and related forms of thalassemia through the support of specialized treatment centers. A second goal is to provide hemoglobinopathy screening and genetic counseling and to educate health professionals and the general public regarding the thalassemias.

Children with Special Health Needs

Hemophilia/AIDS

Pediatric AIDS Health Care Demonstration Program
University of Alabama at Birmingham
Department of Pediatrics
University Station
Birmingham, AL 35294
(205) 934-7883

Pediatric AIDS
BRH-P04056
08/01/90–07/31/93
Project Director(s):
Marilyn J. Crain, M.D., M.P.H.

This project is designed to: (1) Develop community-based, family-centered services for HIV-infected children, youth, and parents in Alabama; (2) develop, implement, and evaluate a community-based model of case management; (3) determine the cost-effectiveness of care for early versus late HIV care; and (4) demonstrate effective ways to reduce the transmission of HIV, especially perinatal transmission, by providing one-to-one education about HIV transmission to infected persons and their sexual partners and extended families. Medical care for HIV infection, family planning services, and social services assistance will be provided for children and their parents in a single clinic site. Efforts to prevent transmission of HIV will center on a series of structured one-to-one sessions with a trained health educator, and a structured interview will be developed to assess self-reported behavior changes.

Mountain States Regional Hemophilia Center Program
University of Arizona Health Sciences Center
Department of Pediatrics
1501 North Campbell Avenue
Tuscon, AZ 85724
(602) 626-6527

Hemophilia
MCJ-042003
10/01/90–09/30/93
Project Director(s):
John J. Hutter, Jr., M.D.

Using a multidisciplinary team approach, this program works to: Identify new patients with hemophilia and other less common congenital bleeding disorders; provide a comprehensive diagnostic and treatment program for all patients and families in the region with congenital bleeding disorders; provide accurate and definitive detection of human immunodeficiency virus (HIV-1) infection in patients, sexual partners, and family members; continue educational, supportive, counseling, and medical treatment programs for patients with HIV infection and their families; and assist patients and families who must bear the increased financial impact of care for patients with HIV infection and the cost of a new generation of clotting factor concentrates.

Hemophilia Diagnostic and Treatment Centers
Arkansas Children's Hospital
1120 Marshall Street, 216-B
Little Rock, AR 72202
(501) 320-3569 or 320-4331

Hemophilia
MCJ-052002
10/01/90–09/30/93
Project Director(s):
Morris Kletzel, M.D.

The Region VI Comprehensive Hemophilia Network is organized according to five comprehensive treatment centers (located in Dallas, Houston, Little Rock, Oklahoma City, and San Antonio) and their respective satellite clinics. Identifying and providing comprehensive clinical services to every individual with hemophilia in Region VI is a significant logistical undertaking, upon which the necessity for HIV risk reduction counseling and education for hemophilia patients and their sexual partners has been superimposed. To achieve this goal, a sharing of resources and personnel between two or more of the existing hemophilia treatment centers/satellites becomes essential. Such sharing of expertise for extending the comprehensive care/risk reduction mandate also involves establishing linkages with other professional and lay organizations who share responsibility for providing similar services to other populations.

Children's Hospital of Los Angeles
Southern California Comprehensive Hemophilia Center
Children's Hospital of Los Angeles
Division of Hematology/Oncology
4650 Sunset Boulevard, Box 54
Los Angeles, CA 90027
(213) 669-2339

Hemophilia
MCJ-062013
10/01/90–09/30/93
Project Director(s):
Jonathan C. Goldsmith, M.D.

The Southern California office serves as both the regional office and the coordinator for the Southern California treatment centers, with responsibility for Hawaii and the other islands. There are nine treatment centers of various sizes in Southern California. In Hawaii, hemophilia care, while provided by private physicians, is coordinated by the Hemophilia Foundation of Hawaii. Administratively, the AIDS Help and Prevention Plan office receives and distributes Federal funds earmarked for risk reduction activity in the region, and has historically provided the leadership and coordination of those risk reduction activities.

CHMC-UCSF Northern Coastal California
Hemophilia Program
Children's Hospital Medical Center
of Northern California
Department of Hematology
747 52nd Street
Oakland, CA 94609
(415) 428-3372

Hemophilia
MCJ-062012
10/01/90–09/30/93
Project Director(s):
Joseph E. Addiego, Jr., M.D.

The Children's Hospital Medical Center/University of California at San Francisco Northern Coastal California Hemophilia Center provides comprehensive hemophilia care and HIV-related services for all patients in a 14-county region. Major goals include continuing present services for our patients and their providers, expanding services to underserved individuals, and participating in clinical research studies to improve future care. One of the principal objectives continues to be that of serving as a resource for families and care providers who manage bleeding problems in their local health care communities. To maximize effectiveness as a regional center, education of patients, families, and community providers will remain a primary goal.

Collaborative Study of the Effects of HIV
on Development of Hemophilic Children
Children's Hospital of Los Angeles
4650 Sunset Boulevard
Los Angeles, CA 90027
(213) 660-5699

Research
MCJ-060570
05/01/88–04/30/93
Project Director(s):
Edward D. Gomperts, M.D.

This project will examine a very important group of children who are infected with HIV. The patients to be studied include children with hemophilia who received repeated infusions of clotting factor concentrate derived from pooled human plasma prior to routine screening of the blood supply. A prospective longitudinal study will examine changes in neurological and neuropsychological functioning, physical growth and development, and immunological status in hemophilic children exposed to HIV and in matched control groups of HIV-negative children with hemophilia and siblings of children with hemophilia.

Developing a Case Management Demonstration Project for Pediatric HIV Patients and Their Families in Los Angeles County
California Children's Services
Los Angeles County Department of Health Services
19720 Arrow Highway
Covina, CA 91724
(818) 858-2110

Pediatric AIDS
BRH-P09001
08/01/88–07/31/91
Project Director(s):
Dale C. Garell, M.D.

The goals of this project are: (1) The development of specialized services through a case management system for maternal and pediatric patients with HIV infection, utilizing a family-centered, community-based, coordinated approach; and (2) the development of a technical assistance network for health services planning and consultation for pediatric HIV infection, building upon the results of this demonstration project.

HIV Transmission to Pediatric Victims of Sexual Abuse
Los Angeles County Department of Health Services
313 North Figueroa Street
Los Angeles, CA 90027
(213) 974-8146

Pediatric AIDS
BRH-PB0914
08/01/90–07/31/91
Project Director(s):
Michael J. Durfee, M.D.

The goal of this study is to obtain data through a national practitioner survey on the number and characteristics of children infected with HIV as a result of pediatric sexual abuse (PSA) in the United States and Canada. Specific objectives of the study are to: (1) Gather demographic, clinical, assault, and situational data on the 18 children earlier identified as infected through PSA; (2) expand the number of original practitioners surveyed (from 63 to 300+) to include all major urban centers in the United States and Canada; and (3) determine if predictors can be developed for the likelihood of HIV transmission under different situational factors describing PSA.

Legal and Ethical Issues in the Delivery of HIV/AIDS Related Services to Adolescents
National Center for Youth Law
114 Sansome Street, Suite 900
San Francisco, CA 94104
(415) 543-3307

Pediatric AIDS
BRH-PB0908
08/01/90–07/31/93
Project Director(s):
Abigail English, J.D.

This project will develop comprehensive information on the laws and ethical principles related to prevention, diagnosis, and treatment of HIV infection and AIDS in adolescents in five key issue areas: Consent, confidentiality, financing of care, participation in research, and discrimination. The project will identify, in consultation with a multidisciplinary group of experts nationwide, the critical legal and ethical barriers to essential services, effective approaches for resolving these barriers, and appropriate means of overcoming ethical dilemmas. We will develop and disseminate essential written materials, including a comprehensive manual, clarifying the legal and ethical issues and outlining approaches for overcoming barriers. Finally, the project will train health care providers, social service personnel, attorneys, and other youth-serving professionals about these issues.

Project AHEAD (Alliance for the Health of Adolescents)
San Francisco Department of Public Health
Special Programs for Youth
375 Woodside Avenue
San Francisco, CA 94127
(415) 753-7780

Pediatric AIDS
BRH-P09052
10/01/90–09/30/93
Project Director(s):
Janet Shalwitz, M.D.

The ultimate goal of Project AHEAD is to provide comprehensive, high quality, accessible holistic care for high-risk or HIV-infected youth in a manner which respects and responds to their individual needs and ensures appropriate family and community support and acceptance. Program objectives include providing consultation and technical assistance, conducting needs assessments, augmenting existing programs, developing a computerized tracking and data collection system, and establishing linkages and referral mechanisms.

Region IX AIDS Help and Prevention Plan
Orthopaedic Hospital
Hemophilia Center
2400 South Flower Street
Los Angeles, CA 90007
(213) 742-1357

Hemophilia
MCJ-062010
10/01/90–09/30/93
Project Director(s):
Carol K. Kasper, M.D.

This urban hemophilia center serves over 200 patients, a large majority of whom are adults. Comprehensive care is offered for hemophilia and for HIV infection. Special strengths include an outstanding orthopedic surgical service, expertise in genetic testing and counseling, and an academic setting with teaching of hematology fellows and clinical research with new, safer medications for management of hemophilia.

UCD Northern Central California Hemophilia Program
UCD Medical Center at Sacramento
Department of Pediatrics
2516 Stockton Boulevard
Sacramento, CA 95817
(916) 734-3461

Hemophilia
MCJ-062011
10/01/90–09/30/93
Project Director(s):
Charles F. Abildgaard, M.D.

The University of California at Davis (UCD) Northern Central California Hemophilia Program provides comprehensive diagnostic and treatment services for individuals with hemophilia and von Willebrand disease who live within its catchment area. The goals of the center are to furnish the best medical treatment possible; provide education to patients, families, care providers, agencies, and center staff; cooperate with consumer organizations; and conduct research to benefit the patient population. These goals are being achieved through clinical services, cooperation and consultation, group meetings, individual contracts, mailings, telephone interviews, and videos.

Mountain States Regional Hemophilia Center Program
University of Colorado Health Sciences Center
Department of Pediatrics
4200 East Ninth Avenue
Box C220
Denver, CO 80262
(303) 372-1753

Hemophilia
MCJ-082003
10/01/90–09/30/93
Project Director(s):
William E. Hathaway, M.D.
Marilyn J. Manco-Johnson, M.D.

Using a multidisciplinary team approach, the Mountain States Regional Hemophilia Center Program will work toward the achievement of a series of objectives, including, but not limited to: Providing diagnostic services for identifying patients and assessing their type and severity of hemophilia or other less common congenital bleeding disorders; detecting inhibitors; performing periodic comprehensive evaluations; teaching home (or self) therapy; providing social, psychiatric, vocational, and genetic counseling; participating in investigative studies relating to hemophilia and its complications; testing new clotting factor concentrates and support initiatives designed to allow for reduced cost; and developing a regional data base to maintain records and provide a regional standard of care.

Connecticut Pediatric AIDS Demonstration Project
Connecticut Primary Care Association, Inc.
30 North Arbor Street
Hartford, CT 06106
(203) 232-3319

Pediatric AIDS
BRH-P01055
08/01/90–07/31/93
Project Director(s):
Richard Jacobsen, Ph.D.
Joanne Allport, M.D., M.P.H.

This program is designed to: (1) Implement in two major cities an effective model for the provision of family-centered care to HIV-infected children through a team approach emphasizing coordination between tertiary sector and community-based primary care providers; (2) provide targeted education and preventive services to at-risk women and youth in community health centers; (3) further develop the capacity of community health centers to deliver a continuum of services to HIV-affected children and families; (4) enhance primary care/tertiary care linkages; and (5) develop and demonstrate a replicable approach for this coordinated care and prevention model.

Comprehensive Hemophilia Diagnostic and Treatment Centers
Children's Hospital National Medical Center
Department of Hematology/Oncology
111 Michigan Avenue, N.W.
Washington, DC 20010
(202) 745-2140

Hemophilia
MCJ-112003
10/01/90–09/30/93
Project Director(s):
Gordon L. Bray, M.D.

The Washington Area Comprehensive Hemophilia Care Centers at Children's National Medical Center and George Washington University provide comprehensive care for 189 pediatric and adult patients with hemophilia and related disorders. HIV-related diagnostic and treatment services as well as access to HIV/AIDS clinical trials are also provided for patients who live outside the metropolitan area.

DC Pediatric AIDS Health Care Demonstration Project
District of Columbia Department
of Human Services
Commission of Public Health
Office of Maternal and Child Health
1660 L Street, N.W., Suite 907
Washington, DC 20036
(202) 673-4551

Pediatric AIDS
BRH-P03054
08/01/90–07/31/93
Project Director(s):
Patricia A. Tompkins, M.S., R.N.

The goals of this project are to: (1) Ensure the availability of coordinated, comprehensive, preventive, primary, secondary, and tertiary care for mothers, infants, children, and youth who have, or are at risk for acquiring, HIV/AIDS; (2) through the provision of family-centered, integrated, multi-institutional case management services, improve access to and appropriate utilization of HIV/AIDS-related health and social services; (3) increase the capacity of preventive or primary care providers to identify and address the health and social service needs of patients in the target populations; and (4) increase the capacity of the child welfare system to provide homes for infants, children, and youth in need of placements due to HIV/AIDS-related circumstances.

Multicity Training of Out-of-Hospital Caregivers of HIV-Infected Children
Children's Hospital National Medical Center
111 Michigan Avenue, N.W.
Washington, DC 20010
(202) 745-4004

Pediatric AIDS
BRH-PB0311
08/01/90–07/31/93
Project Director(s):
Robert Parrott, M.D.

This 3-year project will extend the use of the Children's HIV and AIDS Model Program (CHAMP) education and training program by (l) developing user materials that complement the CHAMP program, and (2) assisting six cities in using the program locally. Ultimately, the project aims to enhance the quality of life of HIV-affected children in these cities by training their caregivers. Objectives for reaching the two interrelated project goals have determined program methods. During the first year, the project will conduct activities to achieve the first goal by producing: (1) A guide to help communities develop primary-care guidelines through a planning workshop; (2) a user's guide for training caregivers to educate and support HIV-affected families through the *Parents' Handbook*; and (3) an attitudes clarification videotape to help caregivers attending training in "Hugs InVited" to personalize the experiences of HIV-affected families and develop more supportive attitudes.

Pediatric AIDS Health Care Demonstration Project
Public Health Trust–Jackson Memorial Hospital
1611 12th Avenue, N.W.
Miami, FL 33136
(305) 549-7744

Pediatric AIDS
BRH-P04010
08/01/88–07/31/91
Project Director(s):
Barbara Lloyd

This project seeks to develop a model program to effectively address the special needs of these HIV-infected infants, children, and women through the development of coordinated and comprehensive care and treatment at community-based facilities. A dedicated case management component has been integrated into the existing network of services through the South Florida AIDS Network.

Pediatric AIDS Community Demonstration Project
Georgia Department of Human Resources
Division of Public Health
878 Peachtree Street, N.E., Suite 214
Atlanta, GA 30309
(404) 894-6622

Pediatric AIDS
BRH-P04005
08/01/88–07/31/91
Project Director(s):
Virginia D. Floyd, M.D.

The goals of this project are to: (1) Provide early diagnosis, access to medical care, therapy, support services, and followup for HIV-positive children and their families and/or caregivers through a multidisciplinary team approach; (2) identify needs and gaps in services, and develop a community pediatric AIDS network of interested agencies and organizations; (3) provide culturally sensitive outreach for prevention to adolescents, including hemophiliacs, minorities, and school dropouts; (4) provide counseling, outreach, psychological support, and home care to families of hemophilic children who are infected with HIV; and (5) offer counseling, prevention education, and extended services to HIV-positive pregnant women.

Sunbelt Region, Region IV South, Regional Hemophilia Program
Hemophilia of Georgia
7100 Peachtree Dunwoody Road, Suite 100
Atlanta, GA 30328-1689
(404) 671-1223

Hemophilia
MCJ-132001
10/01/90–09/30/93
Project Director(s):
Casey Hannan, M.P.H.

The program's main goal is to promote comprehensive care and HIV risk reduction activities for persons with hemophilia, their families, and their sexual partners. The objectives include: (1) Producing a bimonthly update on funding possibilities, program and meeting announcements, and technical information for regional distribution; (2) developing an anonymous and confidential regional patient census; (3) planning and conducting a combined regional meeting with Region VI in Santa Fe; (4) working with the regional executive committee to develop a comprehensive and strategic regional project plan; (5) providing intensive onsite technical assistance for regional programs; and (6) working with individual States to develop a program plan for a statewide, coordinated approach to hemophilia care.

Great Plains Regional Comprehensive Care for Hemophilia Diagnosis
University of Iowa
Department of Pediatrics
2520 Colloton Pavilion
General Hospital
Iowa City, IA 52242
(319) 356-3422

Hemophilia
MCJ-192003
10/01/90–09/30/93
Project Director(s):
C. Thomas Kisker, M.D.

This project is designed to address problems occurring at hemophilia centers in Region VII. Specifically, the project will seek to (1) persuade inactive hemophilia patients to attend annual comprehensive clinics; (2) continue to provide quality comprehensive health care services despite decreasing funds; (3) increase the knowledge of hemophilia/AIDS and improve the continuity of care; (4) ensure that all hemophilia patients have adequate supplies of treatment products; and (5) reduce the transmission of HIV. Strategies include patient followup, fundraising efforts, educational workshops, discussion of treatment alternatives, and patient counseling regarding HIV risk reduction techniques.

Pediatric AIDS Program
Children's Hospital of New Orleans
200 Henry Clay Avenue
New Orleans, LA 70118
(504) 866-2993

Pediatric AIDS
BRH-P06030
08/01/88–07/31/91
Project Director(s):
Michael Kaiser, M.D.

The Pediatric AIDS Program (PAP) has succeeded in filling the gap in service by providing a coordinated system of care for mothers and children infected with HIV. Although it was originally designed to provide care to 20 children, the program presently provides care to 58 children and their families. In addition, PAP has provided education regarding HIV infection in children to hundreds of health care and other professionals as well as to community groups. PAP has presented risk education information to over 2,000 adolescents and young adults.

Resources for Adolescents: A Comprehensive Approach for the Treatment and Prevention of AIDS in Adolescents
Children's Hospital of New Orleans
200 Henry Clay Avenue
New Orleans, LA 70118
(504) 866-2993

Pediatric AIDS
BRH-PB0610
08/01/90–07/31/93
Project Director(s):
Michael Kaiser, M.D.

The goal of Resources for Adolescents (RAP) is to address the important national pediatric AIDS priority of providing appropriate HIV preventive education to adolescents who are in danger of becoming infected with HIV, and developing a comprehensive one-stop medical and support program tailored to the needs of adolescents who are already infected with the virus. The project activities will allow for improved risk reduction messages to at-risk adolescents; earlier identification of those adolescents already infected; and improved one-stop medical and social services for infected adolescents, including infected adolescent mothers, their infants, their significant adolescent partners, and gay youth.

Maryland Pediatric AIDS Health Care Demonstration Projects
Maryland Department of Health
and Mental Hygiene
AIDS Administration
201 West Preston Street
Baltimore, MD 21201
(301) 225-6804

Pediatric AIDS
BRH-P03051
08/01/90–07/31/93
Project Director(s):
Eric M. Fine, M.D., M.P.H.

The Maryland Pediatric AIDS Health Care Demonstration Projects aim to: (1) Incorporate prevention components into existing service programs for women, children, and adolescents; (2) establish a system of community/family-based identification, care, and tracking for children with HIV infection or children at risk for infection who were born to HIV-infected mothers; and (3) plan for future health and social services needs in inpatient, subacute, and community settings.

Promoting Family-Centered Care for Children with HIV Infection and Their Families
Association for the Care of Children's Health
7910 Woodmont Avenue, Suite 300
Bethesda, MD 20814
(301) 654-6549

Pediatric AIDS
BRH-PB0307
07/01/90–06/30/93
Project Director(s):
Beverley H. Johnson

The goals of the project are to increase knowledge about family-centered approaches to care for children with HIV infection and their families; facilitate family/professional collaboration in the design, implementation, and evaluation of services for these children and their families; and increase family-to-family support and networking for families caring for children with HIV infection. To accomplish these goals, the project will collect, disseminate, and also generate information about family-centered approaches to care for children with HIV infection; build skills of family members and professionals in collaborating on the development of services; expand opportunities for families to gain support and information from other families.

Boston Pediatric AIDS Project
Dimock Community Health Center
55 Dimock Street
Roxbury, MA 02119
(617) 442-8800 or 442-8802

Pediatric AIDS
BRH-P01026
08/01/88–07/31/91
Project Director(s):
Jackie Jenkins-Scott, M.S.W.

The Boston Pediatric AIDS Project provides new and targeted services to high-risk inner-city mothers and children in an effort to prevent the spread of AIDS, reduce the high cost of hospitalization, and increase access to and use of lower cost community- and home-based services for those affected by HIV infection. Neighborhood Health Centers and other community-based organizations are the focus, and the project will continue to build capacity for education and primary health care services through these organizations for inner-city Boston.

New England Hemophilia Center
Medical Center of Central Massachusetts—Memorial
119 Belmont Street
Worcester, MA 01605
(508) 793-6276

Hemophilia
MCJ-252003
10/01/90–09/30/93
Project Director(s):
Peter H. Levine, M.D.

The goal of the seven hemophilia centers in the New England region (Region I) is to provide cost-effective comprehensive care to hemophiliacs and their families by coordinating regional resources and integrating already existing health services. In addition, the region will work toward achieving the national goal of preventing transmission of HIV to sexual partners and their offspring through identification of partners and education, counseling, and HIV antibody testing of hemophiliacs and their sexual partners.

Model Program for Pediatric AIDS Prevention and Control in Michigan
Michigan Department of Public Health
Office of Maternal and Child Health
3423 North Logan Street
P.O. Box 30195
Lansing, MI 48909
(517) 335-8900

Pediatric AIDS
BRH-P05032
08/01/88–07/31/91
Project Director(s):
Karen Schrock

The State of Michigan has established medical eligibility and coverage through the Children's Special Health Care Services (CSHCS) program for HIV-positive infants and children effective August 1, 1988. A CSHCS locally based services nurse from the Detroit City Health Department has been providing family assessment and case management services. An outpatient center, the Maternal Infant Center for HIV (MICH), established in January 1989, serves both mothers and children in the same site and provides comprehensive, multidisciplinary care. Age-appropriate risk assessment and counseling curriculums have been developed, and service providers have been trained in their use.

Region V East Hemophilia Treatment Center and AIDS Risk Reduction Network
Hemophilia Foundation of Michigan
411 Huron View Boulevard
Suite 101
Ann Arbor, MI 48103
(313) 761-2535

Hemophilia
MCJ-262004
10/01/90–09/30/93
Project Director(s):
Sally O. Crudder, R.N.

The major regional goals of this project are to: (1) Maintain a regionalized network of comprehensive and AIDS risk reduction programs which provide comparable comprehensive care, treatment, and education; (2) coordinate the consistent collection of data from participating hemophilia treatment center programs to establish the efficiency and effectiveness of the comprehensive care model and the AIDS risk reduction effort; and (3) encourage efforts to identify other funding sources to support hemophilia treatment center and AIDS risk reduction activities.

Youth and AIDS Prevention Program
University of Minnesota
Adolescent Health Program
Box 721-UMHC
Harvard Street at East River Road
Minneapolis, MN 55455
(612) 626-2820

Pediatric AIDS
BRH-P05053
10/01/90–09/30/93
Project Director(s):
Gary Remafedi, M.D., M.P.H.

The goals of the Youth and AIDS Project are to: (1) Prevent the transmission of HIV to and from male youth engaging in homosexual encounters; (2) coordinate referral services for youth who have special AIDS-related prevention and treatment needs; and (3) disseminate the model to other communities. The goals will be achieved by accomplishing the following objectives: Outreach to homosexually oriented youth; peer education and individual AIDS prevention counseling; coordination of medical and psychosocial referrals; development of community networks of sensitive and informed health care providers; replication of the program in various communities throughout Minnesota; and production of audiovisual and print material for dissemination.

Strictly Confidential: Confidentiality Practice and Proposed Guidelines Regarding Newborns and Mothers with HIV Infection and AIDS
Creighton University
Center for Health Policy and Ethics
California and 24th Streets
Omaha, NE 68178
(402) 280-2017

Pediatric AIDS
BRH-PB0702
08/01/89–07/31/91
Project Director(s):
Charles J. Dougherty, Ph.D.

This project's goals include (1) producing a proposed set of national guidelines for balancing protection of confidentiality with the need to protect the safety of others in the diagnosis and care of newborns and mothers with HIV infection and AIDS; (2) producing a document outlining current policies and practices in hospitals, other health care facilities, and social service settings that deal with confidentiality issues in this context; (3) bringing together leading practitioners from across the Nation who are dealing with this patient population to share information and practical perspectives; (4) bringing together leading ethicists and policy analysts to share normative perspectives and help construct fair and responsible guidelines.

Development of a Statewide Health Services Network for Children with HIV Infection and Their Families
New Jersey State Department of Health
Special Child Health Services
CN 364
Trenton, NJ 08625
(609) 292-5676

Pediatric AIDS
BRH-P02011
08/01/88–07/31/91
Project Director(s):
Barbara Kern, M.A.

The two goals of this project are to: (1) Develop a statewide network of Pediatric HIV Treatment Centers that will promote, advocate, and provide for comprehensive, coordinated, family-focused services for children with HIV infection and their families; and (2) develop, as a component of the Children's Hospital AIDS Program, a State and national resource center for information, education, and training regarding the care of children with HIV infection and their families. The Pediatric AIDS Resources Center will serve as a general resource to New Jersey and the Nation regarding pediatric HIV infection; provide education to health care providers; and provide technical assistance to government agencies.

National Pediatric HIV Resource Center
New Jersey Medical School of the University of Medicine and Dentistry of New Jersey
Division of Allergy, Immunology and Infectious Diseases
Department of Pediatrics
185 South Orange Avenue
Newark, NJ 07103
(201) 268-8273

Pediatric AIDS
BRH-PRC021
07/01/90–06/30/93
Project Director(s):
Mary Boland

The National Pediatric HIV Resource Center (NHRC) can serve to bring about communication and collaboration on education and training of providers, policy development, and community planning. A resource center designed to respond to the needs of children and families affected by HIV infection will, through its various activities, assure that individuals and communities understand the concept of comprehensive care and are provided with the skills necessary to make such care a reality.

New Jersey Regional Hemophilia Program and AIDS Supplement
University of Medicine and Dentistry of New Jersey
Robert Wood Johnson Medical School
1 Robert Wood Johnson Place, CN 19
New Brunswick, NJ 08903-0019
(908) 937-7679

Hemophilia
MCJ-312003
10/01/90–09/30/93
Project Director(s):
Parvin Saidi, M.D.

The objective of this project is to continue the New Jersey Regional Hemophilia Program and expand its operation in providing high quality care to the more than 800 estimated patients in New Jersey with hemophilia and related bleeding disorders. In addition to this broad objective, we recognize and define as a separate program objective the dissemination of correct and constructive information on AIDS (including ways to reduce the risk of transmission) and the provision of psychological support and stress management services for all of our patients and their immediate relatives and/or significant others.

AIDS Prevention Services by Health Providers for Homeless, Runaway, and Non-School Youth
ODN Productions
74 Varick Street #304
New York, NY 10013
(212) 432-6332

Pediatric AIDS
BRH-PB0204
08/01/89–07/31/91
Project Director(s):
Oralee Wachter

This project will design (1) a new version of "Sex, Drugs, and AIDS," a pioneering AIDS prevention videotape, and (2) a new curriculum for providers of health services and information for youth who do not attend school. We will engage 10 community-based organizations for a careful pilot test of the new material. As many as 400 young men and women will take part in pilot activities. The goal of the project is to reach disaffiliated adolescents with vital AIDS information, and to do so in a carefully designed and managed demonstration so that tools and techniques can be widely disseminated.

Bronx Pediatric AIDS Consortium
Albert Einstein College of Medicine
1300 Morris Park Avenue
Bronx, NY 10461
(212) 294-2497

Pediatric AIDS
BRH-P02049
08/01/89–07/31/92
Project Director(s):
William Caspe, M.D.

The Bronx Pediatric AIDS Health Care Demonstration Project will be a collaborative effort of the major health care institutions and community-based organizations which provide care to HIV-infected women, infants, and children in the borough of the Bronx. The principal participants in this consortium will combine resources in an effort to enhance the delivery of coordinated, comprehensive, case-managed health care to their constituent populations. Although each of the existing programs has had considerable experience in dealing with AIDS patients, this HRSA-sponsored initiative will allow for the strengthening of each individual program, the improvement of coordination between programs, and the avoidance of unnecessary duplication of effort. Moreover, the specialized services previously available only from certain centers will be shared with the local community providers in an effort to deliver quality services to an even larger population and to enhance patient compliance.

Brooklyn Pediatric AIDS Demonstration Project
State University of New York Health Science Center
at Brooklyn
450 Clarkson Avenue
Brooklyn, NY 11203
(718) 270-1828

Pediatric AIDS
BRH-P02047
08/01/89-07/31/92
Project Director(s):
Herman Mendez, M.D.

The goals of this project are to: (1) Promote communication among pediatric health care and service providers and coordinate and expand medical, educational, developmental, and social services for an increasing population of infants and children with or at risk for HIV infection and their families; (2) identify infants, children, and adolescents with or at risk for HIV infection and their families, in order to provide appropriate assessment, medical management, and access to treatment as it becomes necessary; and (3) provide case management and social services in order to stabilize and support families with or at risk for having HIV-infected children.

Ethical and Policy Issues in Pediatric AIDS
Columbia University
School of Public Health
600 West 168th Street, Seventh Floor
New York, NY 10016
(212) 305-1957

Pediatric AIDS
BRH-PB0212
08/01/90-07/31/93
Project Director(s):
Ronald Bayer, Ph.D.

This project will provide analysis of the evolving ethical issues posed by pediatric AIDS. The core issues which will provide the primary focus include: (1) Screening women for clinical purposes; (2) screening newborns; (3) clinical intervention for women and children—access to care; (4) clinical intervention for women and children—barriers to new therapeutic agents; and (5) access to therapeutic trials for women and children.

Family AIDS Case Management Program
New York City Human Resources Administration
Division of AIDS Services
330 West 34th Street, Room 311
New York, NY 10001
(212) 790-3163

Pediatric AIDS
BRH-P02046
08/01/88-07/31/91
Project Director(s):
Steven Fisher

The New York City Human Resources Administration, the municipal social/welfare service agency, conducts this project through its Division of AIDS Services, providing ongoing case management services to support families with AIDS in Brooklyn, upper Manhattan, and the Bronx—areas that have the Nation's highest reported levels of HIV infection in women and children. With the aim of keeping families intact, children and adults with AIDS receive assistance throughout the course of the illness, and their families receive additional support following the client's death.

Model Comprehensive Health Care Program for Adolescents
Montefiore Medical Center
Adolescent AIDS Program
111 East 210th Street (NW674)
Bronx, NY 10467
(212) 960-6612

Pediatric AIDS
BRH-P02050
08/01/89–07/31/92
Project Director(s):
Karen Hein, M.D.

The purpose of this project is to establish a model comprehensive health care program for adolescents ages 13–21 who are at high risk for or infected with HIV in New York City. The project goals are to: (1) Develop, implement, and document a model for providing comprehensive medical and psychosocial services to adolescents at risk for or infected with HIV; (2) provide effective outreach and collaboration with existing medical and social service agencies in New York City through referral of high-risk or HIV-positive adolescents from other medical and social service agencies to the Adolescent AIDS Program (AAP); and (3) disseminate the model of comprehensive clinical services, and provide advocacy and technical assistance to youth serving agencies gearing up services for high-risk or HIV-positive adolescents outside New York City by developing and distributing a manual describing the AAP for use by health care providers and agencies.

National Hemophilia Program on AIDS Risk Reduction and Comprehensive Care
National Hemophilia Foundation
The Soho Building
110 Greene Street, Suite 406
New York, NY 10012
(212) 219-8180

Hemophilia
MCU-362007
10/01/89–09/30/92
Project Director(s):
Alan Brownstein, M.P.H., M.S.W.

With emphasis on the national goal of preventing the further sexual and perinatal transmission of HIV, the National Hemophilia Foundation will create a National Hemophilia and AIDS Information Center and will organize its AIDS Education and Preventive Service and Comprehensive Care Services to provide risk reduction data and other data collection activities, educational programs, information dissemination, and outreach services in an integrated fashion.

New York City Pediatric HIV/AIDS Comprehensive Center
AIDS Institute
New York State Department of Health
Corning Tower, Room 342
Empire State Plaza
Albany, NY 12237
(518) 486-1383

Pediatric AIDS
BRH-PC0202
09/01/90–08/31/93
Project Director(s):
Gary Burke, M.D.

The goals and objectives of the project are to: (1) Create a coordinated statewide planning process for women, children, and adolescents; (2) coordinate public and private efforts; (3) implement a model computerized clinical/case management system throughout the demonstration projects; (4) foster greatly expanded private sector support, both corporate and foundation; (5) conduct special studies of policy, service, and research significance; (6) integrate provision of medical, social, and other needed services, including entitlements, housing, drug treatment, home health, and supportive social services; and (7) ensure the provision of the highest quality prevention and treatment services to HIV-affected women, children, and adolescents in New York.

Northern Manhattan Women and Children
HIV Demonstration Project
Columbia University
School of Public Health
600 West 168th Street
New York, NY 10032
(212) 928-5103

Pediatric AIDS
BRH-P02027
08/01/88–07/31/91
Project Director(s):
Zena A. Stein, M.D.

The five primary goals of the project are to: (1) Increase regional communication, coordination, and resources for the provision of prevention, health care, and social services to women and children at risk for HIV infection or infected with HIV; (2) augment the provision of case management and social services to HIV-positive women and children; (3) improve the provision of clinical care to women and children infected with HIV or at risk for HIV infection; (4) increase markedly hospital- and community-based AIDS health education; and (5) expand resources for HIV-positive women and children and those at highest risk for infection.

Pediatric HIV/AIDS Health Care Finance Study
New York State Department of Health and Health Research, Inc.
Empire State Plaza
Room 1683
Albany, NY 12237
(518) 474-1689

Pediatric AIDS
BRH-PB0213
08/01/90–07/31/92
Project Director(s):
Paul M. Tenan

The goal of this study is to develop an understanding of services provided to pediatric HIV-infected patients, the resources required to make these services available, and the costs of resources and services. This analysis will serve as the basis for developing payment models that can be used by State Medicaid programs to fully enable providers to offer pediatric patients infected with HIV/AIDS the highest quality services possible within the constraints of cost-efficiency.

Perinatal HIV Transmission in the Urban Setting:
Ethical and Policy Issues
Columbia University
School of Public Health
600 West 168th Street, Seventh Floor
New York, NY 10016
(212) 305-1957

Pediatric AIDS
BRH-PB0203
08/01/89–02/28/91
Project Director(s):
Ronald Bayer, Ph.D.

The Columbia University School of Public Health will organize a program to provide clinicians in pediatric AIDS projects funded by the Health Resources and Services Administration (HRSA) with an opportunity to examine in a systematic way the ethical and policy challenges posed by their work. At times, the goal will be to underscore the ethical principles that ought to undergird clinical and public policy regarding women and children with HIV infection. On other occasions, we hope to elucidate the ethical and policy complexity with which practitioners are confronted. In short, we hope to strengthen the capacity of those facing the challenges of perinatal transmission to think more clearly about the ethical context within which their work takes place.

Regional Hemophilia Diagnostic and Treatment Centers
Mount Sinai School of Medicine
100th Street and Fifth Avenue
New York, NY 10029-6574
(212) 876-8701

Hemophilia
MCJ-362008
10/01/90–09/30/93
Project Director(s):
Louis M. Aledort, M.D.

The objectives of this project are to: (1) Identify all persons with coagulation disorders in the Mount Sinai Medical Center–Cornell University Medical Center catchment area; (2) reach out to satellite centers and Puerto Rico and assure that quality comprehensive care is available and accessible to all identified patients; (3) educate and address the needs of patients, families, health care providers, and the community regarding the treatment and management of coagulation disorders and general comprehensive care issues; (4) manage blood resources, reduce costs, and deliver quality care in a cost-effective and equitable manner; (5) collaborate with and utilize the scientific expertise of our staff to do clinical and basic research of potential benefit to the patients; and (6) implement an AIDS/HIV infection prevention program to reduce the risk and psychosocial impact of AIDS/HIV for patients, families, and providers.

Upstate New York Regional Comprehensive Hemophilia and AIDS Risk Reduction Programs
Mary M. Gooley Hemophilia Center, Inc.
1425 Portland Avenue
Rochester, NY 14621
(716) 544-3630

Hemophilia
MCJ-362009
10/01/90–09/30/93
Project Director(s):
Joyce Strazzabosco

The major goals of this comprehensive program are to control bleeding episodes to avoid the crippling effects of joint disease, and to enable patients to lead normal lives and to fulfill their potential. The objectives include the provision of annual comprehensive evaluations, replacement therapy, and psychosocial assessments, and patient education at an accessible hemophilia center, supplemented by training and placement on a home care program allowing self-infusion of prescribed blood products. The goals of the AIDS risk reduction program are to reduce the spread of infection and to reduce the stress of infected patients and their family members. The objectives include the provision of individual counseling, HIV testing, group discussions for education and support, and informational mailings.

Comprehensive Hemophilia Center, MCH Region IV North
Bowman Gray School of Medicine
Department of Pediatrics
Medical Center Boulevard
Winston-Salem, NC 27157-1081
(919) 748-4324

Hemophilia
MCJ-372006
10/01/90–09/30/93
Project Director(s):
Christine A. Johnson, M.D.

Region IV North has 12 individual comprehensive hemophilia centers in 4 States (North Carolina, South Carolina, Tennessee, and Kentucky). These programs provide comprehensive hemophilia care for a total of 1,735 persons with hemophilia and their families. In addition, the programs offer HIV testing, education, and counseling for a total of 313 individuals with hemophilia who are HIV positive; and comprehensive health care for the region's 93 hemophiliacs with acquired immune deficiency syndrome.

Comprehensive Hemophilia Diagnostic and Treatment Center
University of North Carolina at Chapel Hill
Center for Thrombosis and Hemostasis, CB #7015
433 Burnett Womack Building
Chapel Hill, NC 27599-7015
(919) 966-4419

Hemophilia
MCJ-372007
10/01/90–09/30/93
Project Director(s):
Campbell W. McMillan, M.D.

This project is designed to meet the following major needs: (1) Identification and enrollment of all persons with hemophilia in our catchment area (the central and eastern sections of North Carolina); (2) promotion of an optimal quality of life for all enrolled persons through multidisciplinary, comprehensive health care with an emphasis on instituting home therapy; (3) identification of all persons with hemophilia with respect to HIV infection, including the stage of such infection (if present), associated stress, and risks of transmitting the infection to others; and (4) participation with other medical centers in the development and distribution of comprehensive health care and HIV control throughout the nine southeastern States constituting Maternal and Child Health Region IV.

Oklahoma Comprehensive Hemophilia Diagnostic and Treatment Center
University of Oklahoma Health Sciences Center
Children's Hospital of Oklahoma
P.O. Box 26307
Oklahoma City, OK 73126
(405) 271-3661

Hemophilia
MCJ-402003
10/01/90–09/30/93
Project Director(s):
Charles L. Sexauer, M.D.

The Oklahoma Comprehensive Hemophilia Diagnostic and Treatment Center (OHTC) provides comprehensive care to persons with hemophilia of all ages. In addition, with the advent of HIV in the hemophilia population, OHTC has provided comprehensive medical and psychosocial care for HIV-infected individuals with hemophilia as well as providing risk reduction services to patients and their sexual partners.

Comprehensive Hemophilia Diagnostic and Treatment Center and AIDS Supplement
Oregon Health Sciences University
Child Development and Rehabilitation Center
P.O. Box 574
Portland, OR 97207
(503) 494-8716

Hemophilia
MCJ-412003
10/01/90–09/30/93
Project Director(s):
Everett W. Lovrien, M.D.

The purpose of this project is to maintain a hemophilia program which will provide regionalized comprehensive care for hemophilia patients in Oregon, Washington, Alaska, and Idaho. The goals are to identify persons with hemophilia, describe their health problems, and develop a health care plan for them. Included in the goals are assessments of the medical, psychological, vocational, demographic, financial, social, and family impact of hemophilia.

Cardeza Foundation Hemophilia Center
Jefferson Medical College
Department of Medicine
1015 Walnut Street
Philadelphia, PA 19107
(215) 928-7786

Hemophilia
MCJ-422007
10/01/90–09/30/93
Project Director(s):
Sandor S. Shapiro, M.D.

The Cardeza Foundation Hemophilia Center (CFHC) and its subcontractors, Children's Hospital of Philadelphia, Albert Einstein Medical Center, and the Medical Center of Delaware, serve eastern Pennsylvania, southern New Jersey, and Delaware. Collaboration among these four centers has facilitated the development of a comprehensive HIV risk and stress reduction program, as well as staff education, training, and support programs. Comprehensive hemophilia and HIV-related care at CFHC is designed to reach adolescent and adult hemophiliacs, sexual partners, families, and unserved/underserved hemophiliacs.

Comprehensive Hemophilia Diagnostic and Treatment Center
Pennsylvania State University College of Medicine
Division of Hematology
Milton S. Hershey Medical Center
P.O. Box 850
Hershey, PA 17033
(717) 531-8399

Hemophilia
MCJ-422006
10/01/90–09/30/93
Project Director(s):
M. Elaine Eyster, M.D.

The Comprehensive Care Program for Hemophiliacs focuses on: (1) Maintenance of psychosocial programs; (2) coordination and development of AIDS education and HIV risk reduction counseling programs; and (3) promotion and integration of research activities which include NIH-funded spouse studies and clinical trials, both of which are essential for the development of effective programs for HIV prevention and therapy.

Pediatric AIDS Comprehensive Center
Family Planning Council of Southeastern Pennsylvania
260 South Broad Street, Suite 1900
Philadelphia, PA 19102
(215) 985-2616

Pediatric AIDS
BRH-PC0301
07/01/90–06/30/93
Project Director(s):
Dorothy Mann

The goals of this project are to: (1) Provide comprehensive, family-centered services to HIV-affected families in order to mitigate the effects of the disease, thus allowing families to remain intact and in their homes; (2) develop a system for identifying HIV-affected women, children, and adolescents living in the target areas of Philadelphia through outreach and case identification; and (3) enhance prevention and community education activities to at-risk populations.

Puerto Rico Pediatric AIDS Demonstration Project
Puerto Rico Department of Health
Box 5058
GPO Hato Rey, PR 00919-5058
(809) 721-2264

Pediatric AIDS
BRH-P02044
08/01/88–07/31/91
Project Director(s):
Johnny Rullan, M.D.

Puerto Rico ranks fifth in the Nation in prevalence of pediatric AIDS cases. The Metropolitan Health Region was selected as the target area for this project because of the high prevalence of risk factors and the high number of HIV-infected mothers and children. The goal of the project is to establish a multidisciplinary team which will strengthen existing prevention, case management, and support service systems.

FACTS, Family AIDS Center for Treatment and Support
Rhode Island Department of Health
75 Davis Street
Providence, RI 02905
(401) 277-2312

Pediatric AIDS
BRH-P01012
08/01/88–07/31/91
Project Director(s):
Peter Simon, M.D., M.P.H.

Family AIDS Center for Treatment and Support (FACTS) provides family-centered, community-based, coordinated care to Rhode Island families with AIDS-related problems. The majority of Rhode Island pediatric AIDS cases face urban poverty, family addiction, poor health, lack of access to adequate housing, and educational disadvantage. Minority children and families comprise a large portion of this population. The real work of FACTS is in the inner-city neighborhoods and among the families struggling the most to survive.

Dallas–Fort Worth Area Pediatric AIDS Health Care Demonstration Project—Open Arms/University of Texas Southwestern Collaborative Model Program
University of Texas Southwestern Medical Center
5523 Harry Hines Boulevard
Dallas, TX 75235
(214) 920-2776

Pediatric AIDS
BRH-P06048
08/01/89–07/31/92
Project Director(s):
Janet Squires, M.D.

The goals of this project are to: (1) Provide a family-oriented and coordinated model program of community-based services to meet the medical, psychological, developmental, educational, basic human rights, and family unity and support needs of HIV-infected infants, children, and youth; (2) coordinate a community-based model program of case-managed support for HIV-infected women, aimed at prevention of perinatal HIV transmission; and (3) facilitate communication about educational service availability through a community-based network of agencies and groups that deliver preventive educational services to populations of youth especially at risk for contracting HIV infection.

Development of an Educational Program to Train Volunteers and Foster Families to Work with HIV-Positive Children
Baylor College of Medicine
Department of Pediatrics
1 Baylor Plaza
Houston, TX 77030
(713) 798-1905

Pediatric AIDS
BRH-PB0601
08/01/89–07/31/91
Project Director(s):
Mariam R. Chacko, M.D.

The goals of this project are to: (1) Recruit 50 volunteers and 5 foster families per year to meet the estimated needs for support of HIV-infected infants, children, and youth in Houston/Harris County; (2) provide families of HIV-infected children (including those with AIDS) with appropriate support services, including respite care, support for activities of daily living, and foster placements; and (3) make the recruitment and training program available to cities other than Houston.

Gulf States Hemophilia Diagnostic and Treatment Center
University of Texas Health Science Center at Houston
University of Texas Medical School
Department of Pediatrics
P.O. Box 20708
Houston, TX 77225
(713) 792-5371

Hemophilia
MCJ-482007
10/01/90–09/30/93
Project Director(s):
W. Keith Hoots, M.D.

The programmatic goals of the Gulf States Hemophilia Center are to: (1) Provide all appropriate facets of clinical care, including expertise in hematology, genetics, dentistry, orthopedics, and the management of complications of infection with the hepatitis or human immunodeficiency viruses; (2) educate every hemophilia patient who is infected with HIV or at risk for infection about the means for eliminating/alleviating the risk of spreading this lethal virus; and (3) foster implementation of regional strategies for improving hemophilia care and HIV risk reduction activities.

North Texas Comprehensive Hemophilia Center
University of Texas Southwestern Medical Center at Dallas
5323 Harry Hines Boulevard
Dallas, TX 75235-9063
(214) 688-3388

Hemophilia
MCJ-482006
10/01/90–09/30/93
Project Director(s):
George R. Buchanan, M.D.

The North Texas Comprehensive Hemophilia Center was established in 1983 for the purpose of offering comprehensive diagnostic and treatment services to children and adults with congenital blood coagulation disorders who reside in North Texas. The continued activities of the center will seek to address the multifaceted problems associated with hemophilia and its most serious complication, HIV infection. These problems will be approached through a closely linked array of clinical, educational, and research efforts carried out by skilled health care professionals who will deal with both pediatric and adult patients. Special efforts will be made to reach the underserved adult patient population.

Pediatric AIDS Health Care Demonstration Project
University of Texas Health Science Center
at San Antonio
7703 Floyd Curl Drive
San Antonio, TX 78284-7802
(512) 567-5200

Pediatric AIDS
BRH-P06009
08/01/88–07/31/91
Project Director(s):
John A. Mangos, M.D.

The primary challenge of the South Texas AIDS Program is to enlighten the general public regarding high-risk substance abusers and sexually active youth. Because of the increasing number of infants born with HIV infection to parents who are also infected with the AIDS virus, the goal of recruiting and training foster parents is a high priority for the South Texas Children's AIDS Center. Finally, the center is committed to providing quality medical, psychosocial, and developmental services to HIV-positive children and their immediate families. The primary goal of this project is to reduce the number of HIV-positive cases. The second goal is to provide quality psychosocial and developmental services for HIV-infected children or children who have AIDS.

South Texas Comprehensive Hemophilia Treatment Center
University of Texas Health Science Center
at San Antonio
Department of Pediatrics
7703 Floyd Curl Drive
San Antonio, TX 78284
(512) 567-5265

Hemophilia
MCJ-482008
10/01/90–09/30/93
Project Director(s):
Richard T. Parmley, M.D.

The overriding goals of the regional hemophilia program are to: (1) Maximize the quality of life for patients with hemophilia and other congenital coagulopathies; and (2) prevent the spread of HIV infection through patient and community education, while providing psychosocial support for dealing with the stress of this infection. To accomplish these goals, project objectives have been established in the areas of outpatient care, home care therapy and instruction programs, community awareness, counseling for adolescents regarding HIV infection, mechanisms for outreach to nearby communities, and coordination of center efforts with other programs addressing similar concerns.

Seattle–King County Pediatric AIDS Demonstration Project
Seattle–King County Department of Public Health
110 Prefontaine Place, South, #500
Seattle, WA 98104
(206) 296-4677

Pediatric AIDS
BRH-P10025
08/01/88–07/31/91
Project Director(s):
Kathy Carson

The Seattle–King County Department of Public Health oversees this project to develop a coordinated system of comprehensive care to two groups: Street youth and school dropouts engaged in high-risk intravenous drug use (IVDU) and/or sexual activities; and at-risk and HIV-positive women, infants, and children requiring medical/social case management services. The project builds upon existing resources with the intent to expand the capacity to deliver services in collaboration with local agencies with specific expertise with these targeted groups. Collaboration and coordination exist through a multiagency planning committee with representatives from State and local health and social services, tertiary care facilities, educational institutions, and community-based organizations.

Region V-West Hemophilia Treatment Center Network and AIDS Risk Reduction Program
Great Lakes Hemophilia Foundation, Inc.
8739 Watertown Plank Road
P.O. Box 13127
Wauwatosa, WI 53213-0127
(414) 257-0200

Hemophilia
MCJ-552003
10/01/90–09/30/93
Project Director(s):
Janice R. Hand, R.N.

This project seeks to maintain a regional network of hemophilia treatment centers; provide multidisciplinary hemophilia treatment services which include, but are not limited to, diagnosis, home therapy certification and oversight, genetic counseling, psychosocial counseling, medical/financial counseling, and other forms of professional support as needed; provide community outreach; reduce the risk of transmission of the AIDS virus within the hemophilia community through intensive education and counseling; and support families coping with AIDS in order to reinforce compliance with Centers for Disease Control guidelines regarding safer sex, appropriate infusion techniques, and the like.

Adolescent Health

Primary Care/
Preventive Health Services

Nutrition Information for Coaches and Athletes
University of Alabama at Birmingham
Division of Adolescent Medicine
School of Medicine
University Station
Birmingham, AL 35294
(205) 934-5262

MCHIP
MCJ-013A06
10/01/90–09/30/93
Project Director(s):
Bonnie A. Spear, M.S., R.D., L.D.

The goals of this project are to improve the nutrition knowledge, attitudes, and practices of high school coaches in Alabama, and to establish a network of nutrition resources for the coaches' use. Activities will include training MCH nutritionists in sports nutrition, providing a nutrition workshop for coaches, and developing and distributing educational materials.

Better Health for Rural Teens (Lakeview Project)
Arkansas Department of Health
4815 West Markham Street
Little Rock, AR 72205-3867
(501) 633-6812

MCHIP
MCJ-053001
10/01/88–09/30/91
Project Director(s):
Louise Dennis

The goals of this project are to: (1) Develop a community-based model to address adolescent health needs, and (2) improve the health of Lakeview youth ages 10–19. Four health status improvement objectives have been outlined, based on a preliminary survey of Lakeview youth. These objectives are to: (1) Reduce the number of youth who engage in unprotected intercourse; (2) decrease the number of youth who seldom or never wear seat belts; (3) reduce the number of youth who skip breakfast; and (4) decrease the number of youth who skip dinner. Approaches to service delivery will include a weekly adolescent clinic, comprehensive health education, and an after-school adolescent program to promote physical fitness and positive lifestyles.

Youth Enrichment Support Services in a School Setting
San Francisco Department of Public Health
Family Health Bureau
101 Grove Street, Room 115B
San Francisco, CA 94102
(415) 554-2563

MCHIP
MCJ-063000
10/01/88–09/30/91
Project Director(s):
Geraldine Oliva, M.D., M.P.H.

Balboa High School is an environment where the youth, 95 percent of whom are from minority groups, typically engage in a constellation of high-risk behaviors such as substance abuse, gang activity, drunk driving, and unsafe sex. The three goals of this project are to: (1) Provide a structure of services which will enable low-functioning adolescents to overcome environmental barriers so that they can successfully negotiate their way to productive adult lives; (2) further elucidate and mitigate the contributing factors which lead to high-risk behaviors; and (3) create a positive environment which will support the positive changes in behavior made by adolescents enrolled in the project.

Partners in Action for Teen Health
Colorado Department of Health
4210 East 11th Avenue
Denver, CO 80220
(303) 331-8360 or 331-8372

MCHIP
MCJ-083296
10/01/87–09/30/91
Project Director(s):
Daniel J. Gossert, M.A., M.P.H.
Barbara Schricker Ritchen, R.N., M.A.

This project seeks to prevent and/or reduce the nine health problems found among Colorado adolescents ages 10–19 that were identified in 1986 by the Colorado Department of Health and the Advisory Council on Adolescent Health. Efforts include the development of a model community service system, the collection and analysis of county-specific adolescent health information, and the development of a mechanism for replicating and disseminating the model throughout Colorado, Region VIII, and the United States.

Resources for Enhancing Adolescent Community Health Resource Center
Colorado Department of Health
Family and Community Health Services Division
4210 East 11th Avenue
Denver, CO 80220
(303) 331-8360 or 331-8372

MCHIP
MCJ-083A10
10/01/90–09/30/95
Project Director(s):
Daniel J. Gossert, M.A., M.P.H.
Barbara S. Ritchen, R.N., M.A.

The goal of the Resources for Enhancing Adolescent Community Health (REACH) Resource Center is to improve the health status of adolescents by increasing States' capacity to facilitate local action to prevent and/or reduce a variety of adolescent health problems. Activities will include providing technical assistance, consultation, and training; sponsoring workshops and conferences; developing and disseminating newsletters, training materials, and other publications; developing a data base/resource library; and sharing information.

Program to Improve the Social/Emotional Functioning of Adolescents with Physical Handicaps
University of Illinois at Chicago
College of Medicine
Center for Craniofacial Anomalies
Department of Pediatrics
P.O. Box 6998—M/C 588
Chicago, IL 60680
(312) 996-7546

MCHIP
MCJ-173103
10/01/87–09/30/91
Project Director(s):
Kathleen Kapp-Simon, Ph.D.

The goal of this program is to improve the social and emotional functioning of adolescents with physical handicaps. Particular emphasis will be placed on decreasing social inhibitions and increasing positive attitudes about appearance, self-awareness, empathetic communication, and the ability to be appropriately assertive in a social situation. These skills will help the youth adapt to their physical handicaps and the stresses of adolescence in order to enhance their desire to go to school, to work, and ultimately, to live independently. Parents will be taught how to reinforce the skills.

Predicting Teenage Pregnancy
Wayne State University
Merrill-Palmer Institute
71-A East Ferry
Detroit, MI 48202
(313) 577-2826, 577-4139, or 577-5244

Research
MCJ-260585
10/01/89–09/30/92
Project Director(s):
Joel W. Ager, Ph.D.
Jeanette Poindexter, Ph.D.
Eli Saltz, Ph.D.

To develop preventive intervention strategies to address the serious social problem of adolescent pregnancy in the United States, it is important that its antecedents be understood and that those adolescents at risk for early childbearing be identified. There is a great deal of research on the correlates of adolescent pregnancy, but the conclusions that can be drawn are limited because of methodological shortcomings. The proposed research specifies an explanatory model of adolescent pregnancy risk. Six hypothesized profiles, based upon the model, will be tested. A comprehensive assessment of demographic, social, and psychological variables shown in past research to be associated with adolescent pregnancy will be conducted.

Family-Focused Strategy for Reducing Premature and Unprotected Sexual Activity Among Minority Youth in School-Based Clinics
Dallas County Hospital District–COPC
5201 Harry Hines Boulevard
Dallas, TX 75235
(214) 637-1861

MCHIP
MCJ-488611
03/16/90–09/30/94
Project Director(s):
R. Stephen Rosser, Ph.D.

This project aims to reduce the occurrence of premature and unprotected sexual intercourse among a group of 200 black and 200 Hispanic 10-year-olds recruited from 2 school-based clinics. All of the participants will receive annual health maintenance evaluations, and half will receive educational counseling and intervention services provided by nurses and social workers. These services are designed to enhance parent-child communication, increase parental knowledge of child development and sexuality, and develop problem-solving and decision-making skills among adolescents. Health status indicators and behavioral/cognitive measures will be collected and assessed throughout the project period to evaluate the success of specific intervention approaches.

Options for Pre-Teens
American Association of School Administrators
1801 North Moore Street
Arlington, VA 22209
(703) 875-0728

MCHIP
MCJ-513A05
10/01/90–09/30/95
Project Director(s):
Effie H. Jones, Ed.D.

Options for Pre-Teens is a primary prevention program for at-risk fifth, sixth, and seventh grade boys and girls. Its purpose is to provide preadolescents with the motivation and the skills to abstain from early sexual activity, avoid other risky behaviors, and be successful in school. The program is school based and includes summer sessions and components that address almost every aspect of early adolescent social and intellectual development. The program includes components on life-planning, academic skills improvement, a community volunteer program, school climate enhancement, parent involvement, and student assistance/continuous case management.

Community Mobilization for Pregnant Runaway and Homeless Adolescents
University of Washington
Child Development Center
Division of Adolescent Medicine, WJ-10
Department of Pediatrics
Seattle, WA 98195
(206) 545-1274

MCHIP
MCJ-533A08
10/01/90–09/30/95
Project Director(s):
Robert W. Deisher, M.D.

This project proposes to mobilize communities to address the health needs of the special population of pregnant runaway and homeless adolescents. A pilot program has been developed to address this population's prenatal and general health needs, and this project seeks to improve the capabilities of other Region X public health organizations to address these needs by disseminating this direct field service/case management model. Activities will include helping local service agencies analyze the existing health status of homeless pregnant adolescents; providing technical assistance; developing centralized data collection and information resource systems; and hosting a regional conference of public/private agencies on the subject of health care for pregnant homeless adolescents.

Adolescent Health

Violence/Injury Prevention

PACT for Alternatives to Violence and Abuse
Contra Costa County Health Services Department
Prevention Program
75 Santa Barbara Road
Pleasant Hill, CA 94523
(415) 646-6511

MCHIP
MCJ-063A09
10/01/90–09/30/93
Project Director(s):
Larry Cohen, M.S.W.

Reducing intentional injuries among adolescents in the high-risk region of west Contra Costa County is the health status goal of the PACT for Alternatives to Violence and Abuse project. The specific objectives are reduction of assault/homicide and dating violence/acquaintance rape among adolescents. The project will work to: (1) Decrease these problems among students in five target schools; (2) increase knowledge and participation of community members; and (3) increase the capability of local agencies and institutions.

Risk-Taking Behavior in Adolescents: Impact of Puberty
University of California at San Francisco
School of Medicine
400 Parnassus Avenue, Room AC-01
UCSF Box 0374
San Francisco, CA 94143
(415) 476-2184

Research
MCJ-060564
12/01/87–11/30/90
Project Director(s):
Charles E. Irwin, Jr., M.D.

The objective of this research is to examine the relationship between the timing of physiological development in adolescence and three risk-taking behaviors: Sexual activity, substance use, and accident-related behavior. The underlying hypothesis is that the timing of physiological maturation predisposes adolescents to engage in certain risk-taking behaviors which fulfill critical developmental needs (both psychosocial and psychological) during the second decade of life. Specific psychosocial changes occur along with biological maturation and are associated with adolescent risk-taking behaviors.

Youth Violence Prevention Project
Contra Costa County Health Services Department
Prevention Program
75 Santa Barbara Road
Pleasant Hill, CA 94523
(415) 646-6511

MCHIP
MCJ-063220
10/01/87–09/30/91
Project Director(s):
Larry Cohen, M.S.W.
Nancy Baer, M.S.W.

The extent of the current crisis requires reorienting the system which impacts youth toward prevention. The Youth Violence Prevention Project (YVPP) has identified the following goals and objectives of such an effort: (1) To reduce rates of adolescent suicide, date rape, and fighting/assault in our target communities in Contra Costa County, California; (2) to raise overall community awareness about the preventability of violence (with particular focus on community-based, multidisciplinary training and the effective use of the media); (3) to empower youth (through peer education strategies) to become the prime movers in organizing their peers and networking with the larger community to promote alternatives to violence; and (4) to stimulate violence prevention policies and activities across multiple systems using multiple strategies (e.g., families, schools, workplaces, neighborhood groups, and city/county government).

Health Promotion Project for Urban Youth—Violence Prevention Project
Trustees of Health and Hospitals
of the City of Boston, Inc.
725 Massachusetts Avenue
Boston, MA 02118
(617) 424-5196

MCHIP
MCJ-253420
10/01/87–12/30/90
Project Director(s):
Joanne Taupier

The goals of the project are to reduce the incidence of negative health outcomes of violence by making the clinical setting more responsive to the needs of youth at risk of or engaged in violent behavior, and by linking primary and secondary prevention services to generate a comprehensive approach to the problem.

Massachusetts Adolescent Violence Prevention Project
Massachusetts Department of Public Health
150 Tremont Street
Boston, MA 02111
(617) 727-1246

MCHIP
MCJ-253A11
10/01/90–09/30/95
Project Director(s):
Cynthia Rodgers

The Adolescent Violence Prevention Project will strengthen the capacity of communities to prevent adolescent interpersonal violence by providing staff, technical assistance, and training to two communities to assist them in an approach which includes (1) development of community-based coalitions; (2) development of comprehensive community-based prevention plans; and (3) implementation and evaluation of interventions.

Adolescent Health

Youth in Transition

Peer Support Group for Young Adults with Sickle Cell Disease	Genetics
Jefferson County Sickle Cell Clinic	MCJ-011004
1601 South 12th Avenue	10/01/90–09/30/93
Birmingham, AL 35205	Project Director(s):
(205) 933-8704	Sharon B. Lewis, M.S.H.A.

The goal of this project is to develop a model peer support group for young adults with sickle cell disease in order to provide mutual support and develop a more positive attitude and effective strategies for coping with the illness.

Improving Prevocation Maturity in the Chronically Ill/Disabled Adolescent	MCHIP
Children's Hospital National Medical Center	MCJ-115071
Adolescent Employment Readiness Center	10/01/90–09/30/93
111 Michigan Avenue, N.W.	Project Director(s):
Washington, DC 20010	Patience White, M.D.
(202) 745-3203	

This project establishes a pilot program, the Adolescent Employment Readiness Center (AERC), for 12–19 year olds with rheumatic disease to assist them with career guidance and employment readiness skills. Objectives include: (1) Increasing the number of chronically ill or disabled (CI/D) adolescents served and providing more comprehensive service by having community representatives play an active role in the structure of AERC; (2) increasing awareness of the need for vocational preparation among CI/D adolescents, their parents, employers, vocational rehabilitation and school personnel, and the public; and (3) forming a regional task force that will function as an advisory committee to AERC and will work toward forging a regional and national solution to the prevocational needs of CI/D adolescents.

Young Adults in State Health Care Programs	Research
Johns Hopkins University	MCJ-360578
School of Hygiene and Public Health	10/01/89–09/30/91
Department of Maternal and Child Health	Project Director(s):
624 North Broadway	Henry T. Ireys, Ph.D.
Baltimore, MD 21205	
(301) 955-3384	

State Programs for Children with Special Health Care Needs have begun to recognize and address the pervasive difficulties that face chronically ill and handicapped older adolescents and young adults as they are discharged from these programs. Difficulties include problems in finding medical and related services responsive to their needs, inadequate financial coverage of needed services, psychological distress, and disincentives for vocational training or employment. At the present time, State programs lack the information needed for planning or developing services that would assist this population in their transition to adulthood. The general goal of this study is to help repair this deficit of knowledge through a survey of 1,000 adolescents and young adults who use these programs.

Comprehensive Peer Support Program for Young Women with PKU
Children's Hospital
Gardner House, Room 648
300 Longwood Avenue
Boston, MA 02115
(617) 735-794 5

Genetics
MCJ-251009
10/01/90–09/30/93
Project Director(s):
Susan E. Waisbren, Ph.D.

This project will develop a multifaceted peer support program for young phenylketonuric women as they face the challenges of maternal PKU. The project goals are to enhance their understanding of maternal PKU, to engender more positive attitudes about treatment, and to increase their ability to plan their pregnancies and adhere to a phenylalanine-restricted diet prior to and during pregnancy.

National Center for Youth with Disabilities
University of Minnesota
Adolescent Health Program
Box 721 UMHC
Harvard Street at East River Road
Minneapolis, MN 55455
(612) 626-2825

MCHIP
MCJ-275045
10/01/89–06/30/94
Project Director(s):
Robert W. Blum, M.D., M.P.H., Ph.D.

The National Center for Youth with Disabilities (NCYD) is a technical assistance and resource center whose goal is to improve the health and social functioning of youth with disabilities by providing consultation and disseminating information to those who plan and deliver services and by increasing coordination between the health care system and other service providers. In order to meet its goal, NCYD will maintain the National Resource Library, provide assistance directly or through the Technical Assistance Network, distribute a quarterly newsletter, and conduct national and regional meetings for parents and professionals.

Transition Planning in Health Care: A Family Approach
Parent Advocacy Coalition for
Education Rights Center
4826 Chicago Avenue South
Minneapolis, MN 55417
(612) 827-2966

MCHIP
MCJ-275066
10/01/90–09/30/93
Project Director(s):
Paula Goldberg

This project will: (1) Develop a training model on transition health issues for parents and train parents and related personnel to assist secondary students with chronic illnesses and disabilities to become their own advocates in the health care system; (2) develop a training model and train secondary students to be self-advocates in the health care system; (3) develop two handbooks, one for parents and one for adolescents, which will address transition health care issues; (4) provide individual assistance to families on transition health care issues; (5) disseminate information to parents and professionals across the Nation; and (6) develop a training model for replication.

Family Autonomy Project
University of Virginia
Kluge Children's Rehabilitation Center
2270 Ivy Road
Charlottesville, VA 22901
(804) 924-2345

MCHIP
MCJ-515019
10/01/87–03/31/91
Project Director(s):
Sharon L. Hostler, M.D.

The goal of this project is to ensure the successful transition to adulthood of adolescents with physical disabilities or chronic illnesses by means of interventions with families, the health care team, and the adolescents themselves. The project seeks to encourage the involvement of families in planning for the health care of their children, to modify staff behaviors and institutional practices to promote family autonomy, and to broaden treatment goals so that they include health maintenance and future planning for adolescents with special needs.

Adolescent Transition Program
University of Washington
Adolescent Clinic
Division of Adolescent Medicine
CDMRC WJ-10
Seattle, WA 98195
(206) 545-1273

MCHIP
MCJ-535032
10/01/88–09/30/91
Project Director(s):
James A. Farrow, M.D.

The Adolescent Transition Program addresses the needs of older adolescents with special health care needs who wish to make the transition from pediatric to adult health care. An interdisciplinary team assesses patients for transition readiness and provides patient teaching as well as the identification of appropriate providers in the adult care sector. Other objectives include a comparison of costs of health care in the pediatric and adult sectors, inservice training on the needs of this population, and community dissemination of a transition model.

General Program Concerns

State Staff Development

Continuing Education in Maternal and Child Health to Increase Leadership Skills
San Diego State University
6505 Alvarado Road, Suite 205
San Diego, CA 92120
(619) 594-2984

Training
MCJ-009079
10/01/89–09/30/94
Project Director(s):
Allan C. Oglesby, M.D., M.P.H.

The purpose of this project is to respond to the expressed need of directors of State Title V programs through a national program of continuing education to improve administrative and leadership skills for State Title V staff working in key program positions. The project offers an introductory institute that is basic to the needs of program staff members in all Title V State programs and an Advanced MCH Institute which has a more specific focus for MCH program staff. The purpose is to offer continuing education that will teach and reinforce the history and philosophy of maternal and child health, emphasize interdisciplinary functioning in programs, and train participants in skills needed for improved administration of programs and leadership in the field of maternal and child health. Four institutes (usually two of each level) will be held annually, each serving 35 trainees and providing materials that can be used to reinforce skills learned through the institute curriculum.

Children with Special Health Care Needs Continuing Education Institutes
Columbus Children's Hospital
700 Children's Drive
Columbus, OH 43205
(614) 461-2511

MCHIP
MCJ-395046
07/01/89–06/30/94
Project Director(s):
Antoinette P. Eaton, M.D.

The purpose of this institute is to maintain and strengthen leadership capabilities for medical, nursing, and administrative personnel in programs providing services to children with special health care needs. One institute and one topical seminar are given each year. The institute offers orientation for new staff concerning the history, organization, funding, purposes, and functions of children with special health care needs (CSHCN) programs. The topical seminar attracts senior CSHCN program officers who discuss current issues, develop problem-solving strategies, and forecast future trends in health care services for children with special health care needs.

State Program and Staff Development to Improve Nutrition Services for School-Age Children with Handicapping Conditions
Virginia Department of Health
Children's Specialty Services
109 Governor Street, 6th Floor
Richmond, VA 23219
(804) 786-3691

MCHIP
MCJ-513305
10/01/88–12/31/90
Project Director(s):
Willard R. Ferguson, M.D.
Janet W. Horsley, M.P.H., R.D.

This project provides an interagency approach to program and staff development between the Virginia Department of Health and Virginia Department of Education to develop nutrition services for handicapped children, ages 2–21, who are enrolled in public schools. The purpose of the project is to: (1) Increase the awareness and knowledge of nutritionists, school staff, and families about the nutritional needs of chronically ill children; (2) create networks among families of handicapped children, school systems, and community nutrition resources; and (3) initiate ongoing nutrition programs for school-age handicapped children.

General Program Concerns

MCH/Public Health Professional Development

Adolescent Health Training
University of Alabama at Birmingham
School of Medicine
Department of Pediatrics
Division of Adolescent Medicine
University Station—CHT 157
Birmingham, AL 35294
(205) 934-5262

Training
MCJ-000979
10/01/87–06/30/92
Project Director(s):
Ronald A. Feinstein, M.D.

The goal of the Adolescent Health Training Project is to train health professionals from multiple disciplines to be prepared to take leadership positions as advocates for adolescents. This is accomplished through interdisciplinary didactic and experiential training. Areas of emphasis include service, research, education, and administration. All trainees are involved in activities aimed at providing them with the skills necessary to understand and have an impact on the health-related challenges facing adolescents.

Maternal and Child Health Development Program
University of Alabama at Birmingham
School of Public Health
Tidwell Hall, Room 231
Birmingham, AL 35294
(205) 934-7161

Training
MCJ-009040
10/01/89–06/30/94
Project Director(s):
Robert L. Goldenberg, M.D.

The Southeastern United States has a tremendous problem in the area of maternal and child health, yet very few professionals are trained in public health in its relationship to the provision of services for women and children. The Maternal and Child Health Development Program was established to provide training to professionals in the area of maternal and child health in public health. The overall goal of the Maternal and Child Health Development Program is to improve the health status of mothers and children through interdisciplinary training of public health professionals, provision of technical assistance and professional consultation, and development and dissemination of new knowledge through research activities and advocacy. Training is provided at both the master's and doctoral levels.

Behavioral Pediatrics Training Program
Children's Hospital of Los Angeles
4650 Sunset Boulevard
Los Angeles, CA 90027
(213) 669-2110

Training
MCJ-009091
10/01/86–06/30/91
Project Director(s):
Barbara M. Korsch, M.D.

This program provides training in behavioral, developmental, and psychosocial aspects of pediatrics for faculty, fellows, residents, medical students, and associated health professionals. The program, developed to foster optimal doctor-patient relationships, communication skills, and receptiveness to learning about psychosocial issues, is strengthened through collaboration with the University Affiliated Program, community agencies and schools, and key programs within the Children's Hospital of Los Angeles. The 3-year fellowship in behavioral pediatrics is designed to prepare future specialized faculty in behavioral pediatrics with the appropriate knowledge and skills for practice, teaching, and research.

Interdisciplinary Adolescent Health Training Project
University of California at San Francisco
Division of Adolescent Medicine
400 Parnassus Avenue
Room AC-1, Box 0374
San Francisco, CA 94143
(415) 476-2184

Training
MCJ-000978
10/01/87–06/30/92
Project Director(s):
Charles E. Irwin, Jr., M.D.

The overall purpose of this project is to train individuals in five health care disciplines including medicine, nursing, nutrition, psychology, and social work to become health care leaders prepared to meet the challenges of adolescent health in the 21st century. The project emphasizes leadership development in clinical adolescent health; teaching, research, health policy, and health administration through direct clinical service; didactic coursework and seminars; development and implementation of research projects; participation with faculty in curriculum development, grant development, and ongoing faculty research projects; and participation of trainees with faculty in consultation and technical assistance at the local community, State/regional, and national levels.

Maternal and Child Health Development Training
San Diego State University
6330 Alvarado Court, Suite 207
San Diego, CA 92120
(619) 594-4667

Training
MCJ-009044
10/01/89–06/30/94
Project Director(s):
Betty Z. Bassoff, D.S.W.

The mission of this program is the education and training of public health professionals for leadership in improving the health status of mothers and children, the provision of technical assistance and professional consultation to MCH service programs, and the development and dissemination of new knowledge in MCH and advocacy for mothers and children. The program offers an M.P.H. degree in maternal and child health. Core faculty represent pediatrics, obstetrics, nursing, social work, nutrition, and health planning and evaluation.

Occupational Therapy Leadership Program Training Model
University of Southern California
Department of Occupational Therapy
2250 Alcazar, CSA-203
Los Angeles, CA 90033
(213) 224-5494

Training
MCJ-009048
07/01/88–06/30/92
Project Director(s):
Florence A. Clark, Ph.D., O.T.R., F.A.O.T.A.

The purpose of this project is to train leaders in occupational therapy at the master's and doctoral levels. As part of this enterprise, a new Ph.D. program in occupational science was established. Occupational science, which has as its focus the systematic study of occupations, is conceived of as a basic science that can nurture occupational therapy. A further goal is to produce and disseminate research in occupational science as part of the training project and to rely upon the unique training opportunities available at the University of Southern California-University Affiliated Project to enhance the leadership skill of the trainees. This program is designed to meet the need for pediatric leaders and faculty in occupational therapy nationwide.

Training in Maternal and Child Health
University of California at Berkeley
School of Public Health
308 Earl Warren Hall
Berkeley, CA 94720
(415) 642-1840

Training
MCJ-000103
07/01/89–06/30/94
Project Director(s):
Jeffrey B. Gould

The purpose of this program is to prepare physicians, nurses, social workers, and other professionals for leadership roles in public health programs for mothers and children. The program focus is an interdisciplinary approach that combines knowledge of the complex interrelationships among demographic, social, and economic factors (for program design) with the ability to apply quantitative methodologies for MCH needs assessment, program management, and outcome evaluation.

Training in the Behavioral/Developmental Aspects of Pediatric Health
University of California, San Francisco
Department of Pediatrics
Box 0314
San Francisco, CA 94143
(415) 476-4575

Training
MCJ-002001
07/01/86–06/30/91
Project Director(s):
W. Thomas Boyce, M.D.

The purpose of this project is to improve children's health by including in their ongoing care the prevention and treatment of behavioral and developmental complications arising in the course of normal growth, illness, or disability. This is to be achieved through a 3-year fellowship training program for selected pediatricians who will be equipped to promote, disseminate, study, and integrate behavioral and developmental pediatrics within the broader scope of child health care. Such training provides a clinical approach which is grounded in a knowledge of child and family development, communication and interviewing skills, and the psychosocial contexts in which children develop.

Behavioral Pediatrics Training Program
Yale University
333 Cedar Street
New Haven, CT 06510
(203) 785-2468

Training
MCJ-009087
09/01/86–06/30/91
Project Director(s):
John M. Leventhal, M.D.

The purpose of the Behavioral Pediatrics Training Program is to prepare academicians in the field of behavioral and developmental pediatrics. This is accomplished by a 3-year fellowship that emphasizes training in research, clinical skills, teaching skills, and social policy. In addition, fellows are expected to develop and complete a research project.

Biopsychosocial Knowledge and Skills for Pediatric Practice
University of Connecticut
Health Center
263 Farmington Avenue
Farmington, CT 06032
(203) 241-6891

Training
MCJ-009136
10/01/89-09/30/93
Project Director(s):
Kenneth S. Robson, M.D.

This project identifies the need for practicing pediatricians to increase their skills in managing biopsychosocial conditions that have increasing visibility in children and youth. Through a regularly scheduled small group of 14 regional pediatricians, a clinically based curriculum has been designed and implemented. The fundamental goal of this project is to systematically increase the knowledge and skills of practicing pediatricians in the management of biopsychosocial conditions within their office practice.

COR Group in Psychosocial and Developmental Pediatrics
Yale University
Yale Child Study Center
230 Frontage Road
New Haven, CT 06510
(203) 785-4221

Training
MCJ-009133
10/01/89-09/30/93
Project Director(s):
Richard H. Granger, M.D.

The purpose of this project is to improve the developmental and mental health of children by helping practicing primary care pediatricians incorporate into their ongoing practices both knowledge and skills from the mental health professions. This will facilitate early detection and diagnosis, early direct intervention by the pediatricians, and appropriate referral to and collaborative management with mental health professionals and other child-serving agencies. The core of the program is an ongoing, weekly case seminar attended by a small group of pediatricians, with a senior developmental/behavioral pediatrician and a child psychiatrist serving as coleaders.

Graduate Nursing Program—Nurse-Midwifery
Georgetown University
School of Nursing
37th and O Streets, N.W.
Washington, DC 20057
(202) 687-5041

Training
MCJ-009032
07/01/88-06/30/93
Project Director(s):
Deborah Bash, C.N.M., Ed.D.

In order to reduce the shortage of certified nurse-midwives in the United States, Georgetown University offers a master's degree program in nurse-midwifery to produce nurse-midwives who will be able to provide leadership in Title V maternal and child health programs and similar programs. Students obtain clinical experience in exemplary services in the Washington, DC, metropolitan area and nationwide for the final practicum. A newly developed course in public health offers students a view of historic and current developments in MCH programs and health policy related to perinatal care at the local, State, and Federal levels.

Maternal and Child Health Training Program
University of South Florida
College of Public Health
Department of Community and Family Health
13301 Bruce B. Downs Boulevard
Tampa, FL 33612-3899
(813) 974-4867

Training
MCJ-009128
07/01/89–06/30/94
Project Director(s):
Stanley N. Graven, M.D.

The Maternal and Child Health Training Program seeks to improve the health status of mothers, infants, children, and families by educating health care professionals in multidisciplinary, community-based approaches to address the public health care needs of Florida and the United States. The scope of activities includes the provision of long-term training, continuing education, and technical assistance and research related to program planning and evaluation, advocacy, and the development of public policy.

Nurse-Midwifery in the Public Sector
Emory University
Nell Hodgson Woodruff School of Nursing
Atlanta, GA 30322
(404) 727-6918

Training
MCJ-009115
07/01/88–06/30/93
Project Director(s):
Elizabeth S. Sharp, Dr.P.H.

The purpose of the project is to increase the number of certified nurse-midwives prepared to assume leadership positions in the provision of services to women and their infants in public health settings. Each year, three highly qualified applicants begin the six-semester M.N./M.P.H. dual degree program with clinical specialization in nurse-midwifery at Emory University. The specific maternal and infant health care needs in the Southeast (Region IV) are incorporated into the curriculum, and students have field placement in a public setting during the program. Mechanisms are being developed to assist the graduate in assuming a leadership position in nurse-midwifery in public health following graduation.

Maternal and Child Health Training Program
University of Hawaii
School of Public Health
1960 East-West Road
Honolulu, HI 96822
(808) 948-8832

Training
MCJ-000156
07/01/89–06/30/94
Project Director(s):
Gigliola Baruffi, M.D., M.P.H.

The purpose of the Maternal and Child Health Training Program is to improve the health status of mothers and children through training of health professionals for leadership, provision of technical assistance and professional consultation, development and dissemination of knowledge, and advocacy. Graduate-level instruction, continuing education and technical assistance, community service, and research are conducted by an interdisciplinary faculty and staff in the cross-cultural environment of the University of Hawaii and surrounding communities.

Collaborative Office Rounds Program
Evanston Hospital/Northwestern University
Medical School
Behavioral and Developmental Pediatrics
2550 Crawford Avenue
Evanston, IL 60201
(708) 492-2758

Training
MCJ-009139
10/01/89–09/30/93
Project Director(s):
Peter A. Gorski, M.D.

This program strives to improve practitioners' skills in identifying and counseling children and families at risk for or experiencing behavioral concerns, improve pediatricians' skills in distinguishing preventive opportunities manageable in primary care practice from those requiring specialized interventions, strengthen interactions between pediatricians and community resources on behalf of children's psychosocial development, and prepare pediatricians for advocacy roles in support of public policy initiatives for children and families. Biweekly group meetings are developmentally and topically treated in a comprehensive manner, devoting about four sessions to each topic. Case presentations and discussions, theoretical teaching, literature review, and role-playing techniques will be employed in the service of the educational goals of the program.

COR: Case-Oriented Approaches in a Large Urban Center
University of Chicago
Department of Psychiatry and Pediatrics/
Division of Biological Sciences
Box 411
5841 South Maryland Avenue
Chicago, IL 60637
(312) 702-8310

Training
MCJ-009137
10/01/89–09/30/93
Project Director(s):
Kathleen M. Kelly, M.D.

Pediatricians and child psychiatrists need to work together in order to advocate for children and families and to fulfill the new pediatric contract for complete care for children and families. This requires pediatricians and child psychiatrists to have a broad knowledge base to be able to communicate with each other and to be able to communicate with the larger community systems. These capabilities need to be taught explicitly throughout all of pediatric and physician education. The focus of this grant is primarily practicing pediatricians and child psychiatrists in their offices, with the subsequent sharing of their developing expertise with advanced trainees in both pediatrics and child psychiatry.

Educational Programs Leading to Advanced Competencies in MCH Occupational Therapists
University of Illinois at Chicago
Department of Occupational Therapy (M/C 811)
College of Associated Health Professions
1919 West Taylor Street
Chicago, IL 60612
(312) 996-6901

Training
MCJ-009101
10/01/87–06/30/91
Project Director(s):
Mary C. Lawlor, Sc.D.,
O.T.R./L., F.A.O.T.A.

This project provides educational opportunities through funded graduate study for pediatric occupational therapists, continuing education courses, and research-related technical assistance and consultation. The purpose of the project is to develop and promote advanced competencies in occupational therapists working with children and families, and to enhance collaborative research in MCH-related subjects.

Maternal and Child Health Training Program
University of Illinois at Chicago
School of Public Health
2035 West Taylor Street
Chicago, IL 60612
(312) 996-8866

Training
MCJ-009041
07/01/89–06/30/94
Project Director(s):
Naomi M. Morris, M.D., M.P.H.

The purpose of the Maternal and Child Health Training Program is to improve the health status of mothers and children by training public health professionals for leadership positions; provide technical assistance and professional consultation; develop and disseminate new knowledge; and provide advocacy. These objectives will be achieved through a comprehensive MCH graduate training program including a specialization in analytical skills development, an annual biregional leadership conference, a certificate training in analytical skills, provision of other sponsored continuing education activities, and research focusing on mothers and children. Consultation, technical assistance, and advocacy are provided through individual and combined faculty efforts and memberships in national, State, and local organizations.

Behavioral Pediatrics Training Program
Indiana University
Research and Sponsored Programs
355 Lansing Street
Indianapolis, IN 46202
(317) 274-7819

Training
MCJ-009130
7/01/86–06/30/91
Project Director(s):
Morris Green, M.D.

This training program is designed to prepare academicians for teaching, research, patient care, and community service in behavioral pediatrics; to enhance the capacity of both general and subspecialty pediatricians to engage successfully in those opportunities for prevention and health promotion that are regularly available through pediatric visits in both health and illness; to provide counseling regarding child development and behavior; to promote optimal parent-child interactions; and to help children and parents adapt to and cope with anticipated and unanticipated life events and changes.

Behavioral Pediatrics Training
University of Maryland at Baltimore
School of Medicine
655 West Baltimore Street
Baltimore, MD 21201
(301) 328-6538

Training
MCJ-009093
10/01/86–06/30/91
Project Director(s):
Murray M. Kappelman, M.D.

The Behavioral Pediatrics Training program at the University of Maryland seeks to provide training in behavioral pediatrics to physicians at a number of levels of training. The primary focus is on intensive fellowship level training in behavioral pediatrics through a 3-year fellowship which includes clinical experiences in a wide range of settings (i.e., inpatient, outpatient, schools, and other community settings), opportunities for teaching and administrative experiences, seminars on clinical and research topics, and research training and experience.

Graduate Education in Adolescent Health Care

University of Maryland
Department of Pediatrics
Division of Adolescent Medicine
31 South Greene Street, Third Floor
Baltimore, MD 21201
(301) 328-6495

Training
MCJ-000980
07/01/87–06/30/92
Project Director(s):
Marianne E. Felice, M.D.

The purpose of this project is to provide continued professional training and an interdisciplinary approach to adolescent health care in the Division of Adolescent Medicine at the University of Maryland at Baltimore. The program currently trains professionals committed to careers in adolescent health care in the fields of medicine, nutrition, nursing, psychology, and social work. The overall goals of the project are to promote, develop, and deliver comprehensive, integrated health care services to adolescents by providing interdisciplinary leadership training in medicine, nursing, nutrition, psychology, and social work. The methods used include a core curriculum of didactic material, professional development with emphasis on role modeling, supervised training, and direct patient care.

Training Program in Maternal and Child Health

Johns Hopkins University
School of Hygiene and Public Health
Department of Maternal and Child Health
624 North Broadway
Baltimore, MD 21205
(301) 955-3384

Training
MCJ-000106
07/01/89–06/30/94
Project Director(s):
Bernard Guyer, M.D., M.P.H.

The major goals of the program are to: (1) Prepare MCH professionals for leadership roles in education, public health practice, and research; (2) provide MCH knowledge to the students in the school by offering courses and advice; (3) provide technical assistance to the MCH practice community; and (4) engage in advocacy activities to promote better health for mothers and children.

Academic Training Grant in Behavioral Pediatrics

Trustees of Health and Hospitals
of the City of Boston, Inc.
1010 Massachusetts Avenue
Boston, MA 02118
(617) 534-5650

Training
MCJ-009094
07/01/86–06/30/91
Project Director(s):
Barry Zuckerman, M.D.

The purpose of the Behavioral and Developmental Training Program is to improve behavioral and developmental services to children, especially to those children living in poverty who are at greatest risk for problems. The program goal is met by providing interdisciplinary training to professional personnel in a variety of hospital and community-based settings. Activities designed to achieve these objectives include clinical supervision, seminars, courses at the Boston University School of Public Health, and research activities that emphasize improving the health and the developmental and behavioral functioning of children, especially those children living in poverty.

Maternal and Child Health Training
Harvard School of Public Health
Department of Maternal and Child Health
677 Huntington Avenue
Boston, MA 02115
(617) 432-1080

Training
MCJ-000102
07/01/89–06/30/94
Project Director(s):
Isabelle Valadian, M.D., M.P.H.

The Maternal and Child Health Training program is an academic program for experienced health professionals whose interest is the maintenance and enhancement of the health of mothers and children. The program provides fundamental skills in planning, developing, implementing, and evaluating MCH programs. The curriculum focuses on factors influencing the attainment of optimal health and development, and on health-related services needed by children and women of childbearing age.

Public Health Nutritionists for MCH
Tufts University School of Nutrition
Frances Stern Nutrition Center
New England Medical Center Hospital
750 Washington Street, Box 783
Boston, MA 02111
(617) 956-5273

Training
MCJ-009120
07/01/88–06/30/93
Project Director(s):
Johanna T. Dwyer, D.Sc., R.D.

The purpose of this project is to improve and expand leadership training of nutrition professions in public health and maternal and child health. The major means of accomplishing this is a 23-month internship-master's degree, field experience, and several yearly short courses and continuing education activities. In addition, an active research program for children with special developmental and health needs is in effect.

Training Program in Behavioral and Developmental Pediatrics
University of Massachusetts Medical School
55 Lake Avenue, North
Worcester, MA 01655
(508) 856-3028

Training
MCJ-009092
10/01/86–06/30/91
Project Director(s):
Jack P. Shonkoff, M.D.

The University of Massachusetts Medical School Training Program in Behavioral and Developmental Pediatrics is designed to prepare trainees at the medical school, residency, and fellowship levels to assume a variety of professional roles, ranging from broadly trained clinicians to faculty leaders in academic pediatrics. The specific activities developed to achieve these objectives include formal research training and supervision at the fellowship level, in conjunction with intensive clinical training at all three levels of pediatric education in the management of a broad variety of behavioral and developmental issues in both specialized and general settings.

Adolescent Health Training Program
University of Minnesota
Box 721 UMHC
Harvard Street at East River Road
Minneapolis, MN 55455
(612) 626-2820

Training
MCJ-000985
10/01/87-06/30/92
Project Director(s):
Robert W. Blum, M.D., M.P.H., Ph.D.

The goal of the Adolescent Health Training Program is to provide clinical training, education, research, and service for health, social service, education, and other professionals working with adolescents, in order to promote adolescent health and well-being in the State, the region, and the Nation. This is accomplished through an active program of education, research, and service based at the University of Minnesota, including collaboration with a variety of community-based, State, and national health, social service, and educational institutions working with and on behalf of youth.

Program in Maternal and Child Health
University of Minnesota
School of Public Health
420 Southeast Delaware Street
Box 197, Mayo Building
Minneapolis, MN 55455
(612) 625-3660

Training
MCJ-000111
07/01/89-06/30/94
Project Director(s):
Barbara Leonard, R.N., Ph.D.

The Program in Maternal and Child Health at the University of Minnesota School of Public Health provides graduate training to health professionals pursuing a career in public health with a concentration in maternal and child health. It also provides technical assistance, consultation, and support to maternal and child health Title V agencies, other maternal and child health and related agencies within Region V, and the geographic area to the west of Minnesota.

Public Health Nutrition Training Program
University of Minnesota
School of Public Health
420 Delaware Street, S.E.
Box 197, Mayo Building
Minneapolis, MN 55455
(612) 625-4100

Training
MCJ-009118
07/01/88-06/30/93
Project Director(s):
Mary T. Story, Ph.D., R.D.

The purpose of the public health nutrition training program is to improve and enhance the nutritional health of mothers, children, and adolescents; and to develop, expand, and improve delivery of nutrition services to these groups through leadership training of nutritionists who hold or will hold positions of responsibility within public health sectors. The education program focuses on the acquisition of appropriate knowledge bases, skills, and attitudes which will enable or facilitate leadership in the field of maternal and child nutrition. The degree earned by maternal and child trainees is the M.P.H. in public health nutrition. The training program is also committed to strengthening the knowledge and leadership skills of practicing public health nutritionists and other professionals in maternal and child health through focused continuing education programs.

Pediatrics-Child Psychiatry Collaborative Office Rounds
Washington University
660 South Euclid Avenue
Box 8134
St. Louis, MO 63110
(314) 454-6201

Training
MCJ-009138
10/01/89–09/30/93
Project Director(s):
Abby L. Wasserman, M.D.

The purpose of this program is to expand practicing pediatricians' expertise in diagnosing, evaluating, understanding, and managing psychological and emotional problems in children and families. The forum will be 2-hour, monthly sessions run jointly by an academic child psychiatrist/pediatrician and an academic pediatrician. The major emphasis will be on the pediatricians presenting difficult cases from their own practices which illustrate a certain psychological problem. In addition, speakers from various organizations will be invited to discuss their organizations and how to make referrals, and patients and their families will be invited to discuss problems associated with chronic illness.

Collaborative Study Group: Psychosocial-Developmental Aspects of Child Health
Dartmouth College
Dartmouth Medical School
Hanover, NH 03756
(603) 646-5475

Training
MCJ-009140
10/01/89–09/30/93
Project Director(s):
Steven W. Kairys, M.D., M.P.H.

The role of the primary care pediatrician in the early recognition and effective management of biopsychosocial issues is critical to child health, particularly in our rural location. This project utilizes a case-oriented study group approach which will enable general pediatricians to better recognize and effectively manage psychosocial and developmental problems, as well as encourage ongoing collaboration between psychiatry and pediatrics on a clinical and academic level.

Maternal and Child Health Training
Columbia University
School of Public Health
MCH Program
Center for Population and Family Health
630 West 168th Street
New York, NY 10032
(212) 305-6960

Training
MCJ-009042
10/01/89–09/30/94
Project Director(s):
Rosemary Barber-Madden, Ed.D.

The purpose of the MCH program at Columbia University is to promote and improve the health status of women, children, and their families through four component areas: (1) Degree training and continuing education, (2) research and evaluation programs, (3) consultation and technical assistance programs, and (4) advocacy efforts in professional and public arenas. These program components are implemented with the advice and guidance of a 40-member MCH steering committee that is comprised of representatives of Federal, State, and local health and social services agencies; faculty of MCH-related professional training programs; foundations and professional organizations; and graduates and students.

Training Program in Behavioral Pediatrics
Albert Einstein College of Medicine
Department of Pediatrics
Montefiore Medical Center
1300 Morris Park Avenue
Bronx, NY 10461
(212) 918-5304

Training
MCJ-009096
10/01/86-06/30/91
Project Director(s):
Ruth E. K. Stein, M.D.

This behavioral pediatric training program grows out of recognition of the need for increased understanding of psychosocial factors that affect the health and development of children. It aims to train future faculty in clinical, teaching, and research skills in order to improve the knowledge base and to expose trainees at all levels to current levels of knowledge in the area of behavioral and developmental pediatrics. The goals are met through a variety of clinical, didactic, and research activities.

Training Social Workers for Maternal and Child Health
Columbia University
School of Social Work
622 West 113th Street
New York, NY 10025
(212) 854-5061

Training
MCJ-002027
07/01/87-06/30/92
Project Director(s):
Alex Gitterman, Ed.D.

The Columbia School of Social Work program prepares social work students in health settings to provide direct and indirect services to children, mothers, and families; provides staff development programs for currently employed professionals; and develops curriculum content and case materials for graduate and continuing education courses.

Pediatrics-Child Psychiatry Continuing Education Collaborative Office Rounds at Duke
Duke University Medical Center
Box 3364
Durham, NC 27710
(919) 684-5513

Training
MCJ-009141
10/01/89-09/30/93
Project Director(s):
Barbara J. Howard, M.D.

This project addresses the needs of practicing pediatricians for practical, personal, and ongoing training in the psychosocial-developmental aspects of the care of children and families with a bimonthly study group led by a child psychiatrist and a pediatrician. The project goals are to: (1) Enhance practitioners' knowledge, attitudes, and skills in psychosocial-developmental pediatrics; (2) increase their understanding of the expertise of child psychiatrists and other mental health professionals; (3) explore several new models for teaching, including discussion by the pediatricians as parents themselves, review of videotapes, and the use of new screening tools; and (4) evaluate these efforts as well as the economics of counseling in pediatric practice. Growth of self-sustaining spinoff groups and quality teaching videotapes are additional expected products.

Postgraduate Programs in Maternal and Child Health
University of North Carolina at Chapel Hill
Medical Allied Health Professions
Division of Physical Therapy
Medical School-Wing E, CB #7135
Chapel Hill, NC 27599-7135
(919) 966-4708

Training
MCJ-000149
07/01/87-06/30/92
Project Director(s):
Joyce W. Sparling, Ph.D.

The primary purpose of this project is to develop leaders to guide the future direction of physical therapy in the area of maternal and child health. Leadership roles are construed in terms of academic and clinical educators, consultants, administrators, researchers, or clinical specialists, whose purpose is the provision of MCH educational experiences for related disciplinary personnel. The thrust of these combined educational programs is noted in five major activity areas: The advanced master of science program, continuing education conferences, a postgraduate fellowship program, graduate student elective courses, and advanced clinical practica. An additional emphasis of the project continues to be enhancing the minority presence in each of these programs.

Public Health Nutrition Training:
Maternal and Child Health Training Grant
University of North Carolina at Chapel Hill
School of Public Health
Department of Nutrition
CB #7400, McGavran-Greenberg Building
Chapel Hill, NC 27599-7400
(919) 966-7215

Training
MCJ-000965
07/01/88-06/30/93
Project Director(s):
Janice M. Dodds

This project trains graduate level public health nutrition professionals. The program aims to increase the supply of competent public health nutritionists for leadership in State and local health agencies and nonprofit community health centers serving primarily mothers and children. The curriculum includes supervised clinical experience and concurrent and block public health field experience. An extensive continuing education and technical assistance program is undertaken by the faculty, who also engage in related areas of research. The program collaborates with other Title V-funded programs in the university, in North Carolina, and at the national level.

Training in Behavioral Pediatrics
University of North Carolina at Chapel Hill
School of Medicine
Department of Pediatrics
Chapel Hill, NC 27599-7225
(919) 966-2504

Training
MCJ-009089
07/01/86-06/30/91
Project Director(s):
Frank A. Loda, M.D.

This is a coordinated training program designed to improve the teaching of behavioral pediatrics at the medical student, housestaff, fellowship, and continuing education level. The goals of this program are to: (1) Impart current knowledge and skills in the area of behavioral pediatrics to each trainee level, and (2) develop leaders in the academic communities in behavioral pediatrics.

Training Program in Maternal and Child Health
University of North Carolina at Chapel Hill
School of Public Health
407 Rosenau Hall, CB #7400
Chapel Hill, NC 27599-7400
(919) 966-2017

Training
MCJ-000107
07/01/89–06/30/94
Project Director(s):
Milton Kotelchuck, Ph.D., M.P.H.

The goal of the Training Program in Maternal and Child Health at the University of North Carolina at Chapel Hill is to improve the health status of mothers and children through: (1) Education of public health professionals for MCH leadership; (2) provision of professional consultation and technical assistance; (3) assessment of needs for training; (4) provision of continuing education; (5) research and dissemination of new knowledge; and (6) advocacy on behalf of maternal and child health. The program serves as a source of support for the region in providing vital technical assistance, consultation, and continuing education.

Behavioral Pediatrics Fellowship Training
Case Western Reserve University
2074 Abington Road
Cleveland, OH 44106
(216) 844-3752

Training
MCJ-009088
09/01/86–06/30/91
Project Director(s):
Betsy Lozoff, M.D.

The purpose of the training program is to improve behavioral aspects of general and subspecialty pediatric care by preparing behavioral pediatric fellows for careers of academic leadership in clinical care, teaching, and research. Training in clinical care prepares fellows to become effective tools in the diagnosis and management of behavioral disturbances and to care for patients with special needs in four areas—normal development, psychological aspects of physical disease, developmental disabilities, and psychophysiologic disorders. Training in teaching prepares fellows to contribute to the scientific base of behavioral pediatrics by teaching them to be independent investigators who are ready to sustain investigative careers. Learning by doing, with intensive supervision in case management, teaching, and research is the primary mechanism of training and entails a coordinated interdisciplinary effort on the part of faculty members in pediatrics, psychology, psychiatry, family therapy, and special education.

Center for Continuing Education in Adolescent Health
Children's Hospital Medical Center
Division of Adolescent Medicine
Elland and Bethesda Avenues
Cincinnati, OH 45229
(513) 559-4681

MCHIP
MCJ-393A04
10/01/90–09/30/95
Project Director(s):
Linda S. Wildey, M.S.N.

The goal of the Center for Continuing Education in Adolescent Health is to provide continuing education that meets the training needs of local care providers. The goal will be accomplished by: (1) Designing and developing curriculum content that addresses multiple adolescent health issues and will be used to educate local service providers; (2) developing and implementing a "train the trainer" curriculum which will facilitate dissemination of the curriculum content; (3) planning, conducting, and evaluating a minimum of 24 workshops throughout Region V for primary care providers of adolescents, using MCH personnel trained as trainers in the core curriculum; and (4) conducting a "train the trainer" program for MCH personnel on a national basis.

Collaborative Psychosocial-Developmental Project
Case Western Reserve University
School of Medicine
2074 Adelbert Road
Cleveland, OH 44106
(216) 844-3753

Training
MCJ-009142
10/01/89–09/30/93
Project Director(s):
John H. Kennell, M.D.

The purpose of this collaborative psychosocial-developmental project for primary care community pediatricians is to enhance cooperation in educational activities between the Departments of Pediatrics and Child Psychiatry. This Collaborative Office Rounds (COR) project is led by experienced educators utilizing established approaches (e.g., group discussion and review of recent research publications) and novel ones (e.g., video recordings of pediatricians in their offices with their patients, teaching family systems, and family intervention skills) and has the enthusiastic support of both departments and the pediatric community.

Education to Improve Services for Mothers and Children
Case Western Reserve University
Department of Nutrition
Cleveland, OH 44106
(216) 368-2440 or 368-3231

Training
MCJ-000140
07/01/67–06/30/93
Project Director(s):
Janice Neville, D.Sc., M.P.H., R.D.

The purpose of this project is to improve and extend education of persons providing care for mothers and children so that nutrition services of an appropriate kind and quality are provided through public agencies and facilities. The major focus is on education of public health nutritionists with special expertise in maternal and child nutrition care. Education for persons in other health professions is provided in classes and continuing education events.

Fellowship Training in Behavioral Pediatrics
Columbus Children's Hospital
Department of Pediatrics
700 Children's Drive
Columbus, OH 43205
(614) 461-2175

Training
MCJ-009053
09/01/86–06/30/91
Project Director(s):
Daniel L. Coury, M.D.

The Behavioral Pediatrics Fellowship Training Program is intended to train future academicians in the area of behavioral pediatrics. These future leaders receive training in clinical teaching and research skills through patient care, collaboration in research, didactic coursework, and preparation of lectures and other teaching presentations. Although the program emphasizes the opportunity for each fellow to develop his or her own special area of expertise, all trainees are required to complete a core curriculum in behavioral pediatrics. This core curriculum has been published and is available for implementation in other centers.

Interdisciplinary Training Project in Adolescent Health Care
Children's Hospital Medical Center
Elland and Bethesda Avenues
Cincinnati, OH 45229
(513) 559-4681

Training
MCJ-000964
07/01/87–06/30/92
Project Director(s):
Joseph L. Rauh, M.D.

This project trains in six disciplines (medicine, nursing, nutrition, psychology, social work, and special education), conducts and presents research, and provides integrated community-based, multiservice health care. It is an interdisciplinary program which includes a basic training curriculum (through seminars and case conferences), a broad clinical base, and a research program (through seminars, project design, and study implementation). Several innovative program components include the training of national and local leaders, the Adolescent Developmental Disabilities Program, and the Adolescent Center for Education.

Joint Public Health Social Work Training
University of Pittsburgh
Graduate School of Public Health
130 De Soto Street
Pittsburgh, PA 15261
(412) 624-4756

Training
MCJ-000114
07/01/87–06/30/92
Project Director(s):
Kenneth J. Jaros, Ph.D.

This project supports advanced social work training in public health by means of an interdisciplinary curriculum in public health and social work. Holders of the M.S.W., with past experience in health services to mothers and children, can pursue the M.P.H. only or both the Ph.D. in social work and the M.P.H., by means of an integrated program between the Graduate School of Public Health and the School of Social Work. Graduates are prepared to assume leadership roles in public health social work, in either Title V-related programs or academic environments.

Nurse-Midwives, Leaders in MCH Planning
University of Pennsylvania School of Nursing
420 Guardian Drive
Philadelphia, PA 19104-6096
(215) 898-8281

Training
MCJ-009051
07/01/88–06/30/93
Project Director(s):
Joyce Thompson, C.N.M., Dr.P.H.

The primary purpose of this training project is to provide tuition assistance to train selected students in the graduate program of nurse-midwifery. The secondary purpose is to continue to strengthen and expand the curriculum that prepares graduates to become knowledgeable about maternal/child health legislation; policy development; and planning for and implementation of services at the national, State, and local levels. Course content directs the students to explore the relationship between poverty, infant mortality, and the public sector response to identified problems and needs of low-income women. The public policy practicum at the MCH divisions of selected States and municipalities in DHHS Region III gives students first-hand experience in the complexities of the political, legislative, and administrative processes necessary to make services a reality at the program level.

Maternal and Child Health Project
University of Puerto Rico
School of Public Health
Maternal and Child Health Program
G.P.O. Box 5067
San Juan, PR 00936
(809) 758-2525, ext. 1445

Training
MCJ-000161
07/01/89–06/30/94
Project Director(s):
Ana Navarro, M.D.

The main purpose of this program is to equip Puerto Rico with highly trained health professionals in the field of M.P.H. or MCH to fill positions involving planning, directing, supervising, teaching, research, and policy formulation at MCH programs in the Commonwealth's Department of Health, San Juan City Health Services, community health services in the area of family planning, schools of health, and services for handicapped children. The M.P.H.-MCH program is under the supervision of the Department of Human Development and involves a two-track program: (1) An 11-month day session and a 3-year part-time evening session.

Child Psychiatry and Pediatric Joint Education
Rhode Island Hospital
593 Eddy Street
Providence, RI 02903
(401) 277-5617

Training
MCJ-009134
10/01/89–09/30/93
Project Director(s):
Gregory K. Fritz, M.D.

The project seeks to enhance pediatricians' psychosocial knowledge and skills through a series of evening case discussions and lectures. Young pediatricians newly entering practice meet with child psychiatry and pediatric faculty to focus on a variety of psychosocial issues throughout the academic year.

Maternal and Child Health Training Project
University of South Carolina
College of Social Work
Columbia, SC 29208
(803) 777-7814

Training
MCJ-009097
07/01/87–06/30/92
Project Director(s):
Patricia G. Conway, M.S.W., Ph.D.

This 5-year training project will: (1) Prepare social workers to assume leadership roles in the health field, with a special emphasis on maternal and child health; (2) provide ongoing education for social workers currently working in maternal and child health positions; and (3) disseminate state-of-the-art information regarding social work practice and education in maternal and child health.

Graduate Training Program in Public Health Nutrition
University of Tennessee at Knoxville
404 Andy Holt Tower
Knoxville, TN 37996-0140
(615) 974-5445

Training
MCJ-000110
07/01/90–06/30/91
Project Director(s):
Betsy Haughton, Ed.D., R.D.

This program educates and trains students and practitioners to meet an increasing demand for qualified personnel in the field of maternal and child nutrition. It also provides continuing education to practitioners in Region IV and long-term master's-level graduate education.

Pediatrics-Child Psychiatry Continuing Education
Vanderbilt University Medical Center
Department of Pediatrics and Psychiatry
Division of General Pediatrics
2948 The Vanderbilt Clinic
Nashville, TN 37232-5577
(615) 322-6134

Training
MCJ-009135
10/01/89–09/30/93
Project Director(s):
Gerald B. Hickson, M.D.

This project is a joint pediatric-child psychiatry education program via collaborative office rounds (COR) and involves Vanderbilt faculty, academic fellows, and six practicing pediatricians. The project goal is to address deficiencies in the education of child health providers by developing a case-based education program conducted twice a month. The educational objectives will be to increase understanding of the interplay that occurs between emotions and physical health, increase knowledge of psychiatric disorders and the subtle ways they may present, and increase awareness of the primary physicians' competency with respect to psychosocial-developmental disorders. Each COR will involve presentation of a case and appropriate educational material.

Behavioral Pediatrics Training Program
Medical College of Virginia
School of Medicine
Virginia Commonwealth University
Box 568
Richmond, VA 23298
(804) 786-6493

Training
MCJ-009095
10/01/86–06/30/91
Project Director(s):
Joseph R. Zanga, M.D., F.A.A.P.

This program will train pediatricians to assume positions of leadership in the academic community in behavioral and developmental pediatrics. These individuals will be well prepared to provide services to families in need, supervise pediatricians and pediatric trainees in the provision of developmental and behavioral services, educate professionals in behavioral pediatrics, make new contributions to the field, and help to better define the field. It is hoped that they will also contribute to the empirical data base necessary for the scientific advancement of behavioral medicine.

Model Integrating Self-Help in Training and Services
George Mason University
National Project for Self-Help Groups
4400 University Drive
Fairfax, VA 22030-4444
(703) 764-6750

Training
MCJ-009127
03/01/89–02/28/91
Project Director(s):
Ellen McGinn

The purpose of this project is to develop a model to integrate self-help concepts and principles into training for health care professionals and into health care services. The model involves catalyzing a wide range of activities at the national level—training and education, information dissemination, research, and network development—to improve access to self-help groups nationwide. The specific objectives also involve increasing public and professional awareness of the concept, uses, and benefits of self-help groups, as well as advising public agencies on ways to incorporate self-help approaches into their projects.

Adolescent Health Training
University of Washington
Department of Pediatrics
Division of Adolescent Medicine
WJ-10
Seattle, WA 98195
(206) 545-1249

Training
MCJ-000970
07/01/87–06/30/92
Project Director(s):
James A. Farrow, M.D.

The primary purpose of this training program is to provide multidisciplinary training to medical and psychiatry fellows, residents and students, and nursing, psychology, social work, and nutrition interns and fellows in effectively treating the complex health problems of adolescents. Training is provided in a dozen facilities, including both traditional and nontraditional health care settings, in the greater Seattle area. Major training/service accomplishments are in the area of early intervention for youth at risk for drinking and driving, early intervention to reduce the risk of contracting AIDS among "street" and emancipated youth, specific coping strategies for chronically ill youth, and comprehensive family intervention for pregnant adolescents.

Leadership Training in Pediatric Physical Therapy
University of Washington
Department of Rehabilitation Medicine
Division of Physical Therapy, RJ-30
Seattle, WA 98195
(206) 543-7030

Training
MCJ-009103
07/01/87–06/30/92
Project Director(s):
Marjorie E. Anderson, Ph.D.

This program is designed to provide highly specialized pediatric physical therapy training on both a long-term basis at the postprofessional level and a short-term continuing education basis within the Pacific Northwest region. Both the long-term academic program and the short-term continuing education program are based on clinical programs which include early identification of infants with actual or potential disabling conditions; early intervention techniques and practices to prevent, ameliorate, or manage such conditions; and longer-term therapeutic and management skills that can be applied to children and adolescents with disabling conditions. The ultimate goal of the project is to prepare an enlarged pool of clinical specialists and academicians to assume leadership positions in the delivery and improvement of community-based health care services for mothers and children.

Maternal and Child Health Public Health Training
University of Washington
School of Public Health and Community Medicine
Maternal and Child Health Program
Mail Stop SC-36
Seattle, WA 98195
(206) 543-8827

Training
MCJ-009043
07/01/89–06/30/94
Project Director(s):
Irvin Emanuel, M.D., M.S.P.M.

The goal of this program is to improve the health of American mothers and children through training, research, service, and advocacy. By means of a 2-year master of public health degree which requires a thesis, this program trains specialists to become leaders as administrators, data analysts, and researchers in public health and other agencies concerned with maternal and child health. Our faculty and students conduct both etiologic and service-related research directed toward improving prevention and treatment of important problems.

Graduate Training in Maternal Newborn Nursing
University of Wisconsin at Madison
School of Nursing
600 Highland Avenue
Room K6/250
Madison, WI 53792
(608) 263-5194

Training
MCJ-000134
07/01/88–06/30/93
Project Director(s):
Patricia T. Becker, R.N., Ph.D.

The purpose of this training project is to improve health care for mothers and infants at risk for perinatal complications by preparing nurses at the master's level to assume leadership positions in hospital and community-based health care agencies. Training is accomplished through a core program of courses in maternal/newborn health care, family process, human development, education, health care delivery systems, and health policy development; coursework and experience with the research process; a wide variety of supporting cognate courses; and clinical field placements with advanced practitioners.

Graduate Training in Pediatric Nursing
University of Wisconsin at Madison
School of Nursing
600 Highland Avenue
Madison, WI 53792
(608) 263-5282

Training
MCJ-009052
07/01/84–06/30/93
Project Director(s):
Karen F. Pridham, R.N., Ph.D.

The purpose of this graduate training project in pediatric nursing is to prepare nurses for leadership. The first goal is to strengthen the curriculum in relation to: (1) Family-centered care of children with chronic conditions and of high- and at-risk infants and young children; and (2) coordination of care in the various settings in which children with chronic conditions or who are at-risk experience care, with the goal of enhancing the family's role in care coordination. In addition, the project aims to strengthen the pediatric nursing program in specialty pediatric nursing and to determine future educational and research directions of pediatric nursing concerning family-centered care of children at risk for or with chronic conditions. The second major goal is to strengthen student involvement in Title V agencies and programs and collaboration among faculty and agency/program nursing staff.

General Program Concerns

Program Coordination and Networking

Council of Regional Networks for Genetic Services
Arizona Department of Health Services
Office of Risk Assessment and Investigation
Division of Disease Prevention
3008 North Third Street, Suite 101
Phoenix, AZ 85012
(602) 230-5868

Genetics
MCJ-041004
10/01/86–09/30/93
Project Director(s):
F. John Meaney, Ph.D.

The major goals of this project include the following: (1) Communication among the regional networks; (2) development and implementation of a national system of data collection and analysis; (3) development of a program for quality assurance; (4) attention to issues of public education in the area of genetics; (5) attention to issues involving reimbursement for genetic services; and (6) establishment of policy and advocacy for genetics programs and for individuals with genetic conditions.

Pacific Southwest Regional Genetics Network
California Public Health Foundation
California Department of Health Services
Genetic Disease Branch
2151 Berkeley Way, Annex 4
Berkeley, CA 94704-1103
(415) 540-2696

Genetics
MCJ-061011
10/01/84–09/30/92
Project Director(s):
George C. Cunningham, M.D.

This project is designed to improve the quantity, quality, and accessibility of genetic services in the tristate region of California, Nevada, and Hawaii. The goals of the project are to: (1) Identify genetic services needs for the region in the areas of screening, diagnosis, treatment, counseling, and prevention; (2) identify and develop resources to meet these needs; (3) establish standards for services to ensure high quality and public protection and confidence in genetic services; and (4) increase professional and public knowledge of genetic conditions and their prevention.

Educating State Legislators About Maternal and Child Health
National Conference of State Legislatures
1560 Broadway, Suite 700
Denver, CO 80202-5140
(303) 830-2200

MCHIP
MCU-086045
10/01/90–09/30/95
Project Director(s):
Martha P. King

The goal of this project is to maintain a national resource center that assists legislators and others who are formulating maternal and child health public policy. The project will inform, educate, and update new and veteran legislators and Federal officials about maternal and child health facts, issues, legislative options, and State innovations. Project objectives include: Expanding the maternal and child health knowledge base within State legislatures; and promoting collaboration among State legislatures, the Maternal and Child Health Bureau, State and Federal agencies, and national, State, and local organizations regarding maternal and child health policy.

Mountain States Regional Genetic Services Network
Colorado Department of Health
Medical Affairs and Special Programs
4210 East 11th Avenue
Denver, CO 80220
(303) 331-8373

Genetics
MCJ-081002
10/01/84–09/30/92
Project Director(s):
Robert S. McCurdy, M.D., M.P.H.

The Mountain States Regional Genetic Services Network is a consortium of States, including Arizona, Colorado, Montana, New Mexico, Utah, and Wyoming, created to provide more comprehensive and better coordinated genetic services to the populations of these States. The network goals are to increase the communications, coordination, and collaboration efforts of the Mountain States region for the delivery and enhancement of genetic services. The work of the Mountain States Regional Genetic Services Network is centered around the accomplishment of the objectives set by the Steering/Planning Committee and nine working committees.

Alliance of Genetic Support Groups
Alliance of Genetic Support Groups
1001 22nd Street, N.W., Suite 800
Washington, DC 20037
(202) 331-0942

Genetics
MCJ-111008
10/01/89–09/30/91
Project Director(s):
Jayne Mackta

The goal of the Alliance of Genetic Support Groups is to promote optimal health care and social and psychological functioning for individuals and families affected by genetic disorders. By strengthening collaboration and communication between consumers and providers of genetic services, the Alliance of Genetic Support Groups seeks to increase awareness about genetic disorders, improve the availability and accessibility of high quality genetic services, and enhance education about the needs of individuals and families affected by genetic disorders.

Business Partnership for Family Health
Washington Business Group on Health
229-1/2 Pennsylvania Avenue, S.E.
Washington, DC 20003
(202) 547-6644

MCHIP
MCU-116044
10/01/90–09/30/95
Project Director(s):
Miriam Jacobson

This project will improve maternal and child health status, policies, and programs through enhanced communication between the Maternal and Child Health Bureau (MCHB) and American business. A Business Advisory Board will be developed to facilitate ongoing collaboration; leadership seminars will be held in two communities to discuss MCH issues and develop action strategies; and information will be disseminated to businesses nationwide through national business organizations.

Facilitating Improvement of State Programs for Pregnant Women and Children
National Governors' Association
444 North Capitol Street, Suite 250
Washington, DC 20001
(202) 624-7820

MCHIP
MCU-117014
10/01/89–09/30/92
Project Director(s):
Ian T. Hill

This project will provide assistance to States as they seek to improve primary perinatal and child health care programs by identifying and disseminating information about constructive, practical, and innovative program and policy strategies. Opportunities for collaborative policy initiatives among various State agencies, including Medicaid and MCH, will be identified to facilitate coordinated implementation and operations. The project will actively monitor State efforts to develop and implement innovative Medicaid and MCH initiatives for pregnant women, children, and families.

Legal Assistance Project
Association of Maternal and Child Health Programs
2001 L Street, N.W., Suite 308
Washington, DC 20036
(202) 775-0436

MCHIP
MCJ-113805
10/01/88–09/30/91
Project Director(s):
Catherine A. Hess, M.S.W.

This project is designed to improve the ability of State maternal and child health programs to: (1) Effectively implement Title V of the Social Security Act; (2) coordinate with other related Federal programs; and (3) develop creative approaches for utilizing other such programs to meet the needs of mothers, children, adolescents, children with special health care needs, and families.

Maternal and Infant Health Collaboration
American College of Obstetricians and Gynecologists
409 12th Street, S.W.
Washington, DC 20024-2188
(202) 863-2579

MCHIP
MCU-116018
10/01/88–09/30/91
Project Director(s):
Janet Chapin, R.N., M.P.H.

This project addresses the need to make current information on obstetric and gynecologic health available to the directors of State maternal and child health programs in a timely fashion. The following project objectives have been established to reach this goal: (1) Facilitate communications between and among State MCH directors and private sector and academic sector OB/GYNs; (2) encourage the involvement of OB/GYNs in the development of public policy regarding the reduction of infant mortality and the provision of perinatal services to all women; and (3) devise strategies to increase OB/GYN participation in Medicaid and services provided through other public programs.

MCH Partnership for Information and Communication
Association for Maternal and Child Health Programs
2001 L Street, N.W.
Suite 308
Washington, DC 20036
(202) 775-0436

MCHIP
MCU-116046
10/01/90–09/30/95
Project Director(s):
Catherine A. Hess

The project goals are to: (1) Achieve improved information collection and dissemination supporting national, State, and local level policy and program development; and (2) promote improved consistency, accountability, and effectiveness of State Title V programs.

Training and Technical Assistance Program Support
Ebon Research Systems
820 Quincy Street, N.W.
Washington, DC 20011
(202) 722-5242

MCHIP
MCU-116032
07/01/90–06/30/92
Project Director(s):
Guy Hudgins

Ebon's training and technical assistance (T&TA) administrative support system will provide convenient and accurate services to the Maternal and Child Health Bureau, including: Efficient monitoring of T&TA projects; acquisition of additional T&TA consultants as necessary; prompt reimbursement to T&TA providers for fees, travel expenses, and supplies; logistical support for semiannual conferences; and any other related services as requested.

National Center for Policy Coordination in Maternal and Child Health
Institute for Child Health Policy
5700 Southwest 34th Street
Suite 323
Gainesville, FL 32608
(904) 392-5904

MCHIP
MCJ-125036
10/01/88–09/30/93
Project Director(s):
Steve A. Freedman, Ph.D.

The mission of the National Center for Policy Coordination in Maternal and Child Health is to extend the capability of the Office of Maternal and Child Health and regional constituent offices to fulfill their mission to develop and implement policy that: (1) Assures mothers, children, adolescents, and families access to quality health care; (2) brings about coordination of efforts, reduces duplication, and enhances integration of service delivery at the Federal, State, and local levels; (3) fosters the collection, analysis, and dissemination of data that assure delivery of needed services in an efficient manner; and (4) facilitates the development of project proposals and program methods that effectively address emerging trends and issues in maternal and child health care.

Southeastern Regional Genetics Group
Emory University School of Medicine
Pediatrics/Medical Genetics
2040 Ridgewood Drive
Atlanta, GA 30322
(404) 727-5840

Genetics
MCJ-131002
10/01/83–09/30/93
Project Director(s):
Louis J. Elsas II, M.D.

This project seeks to improve the public and professional awareness and the quantity and quality of genetic services rendered in a nine-State region which includes Alabama, Florida, Georgia, Kentucky, Louisiana, Mississippi, North Carolina, South Carolina, and Tennessee. The overall project goal is to establish linkages among public health staff, university-based professionals, private practitioners, and consumers regarding current and future uses of genetics.

Development of a Regional Strategy for MCH in U.S.-Related Pacific Islands
Pacific Island Health Officers Association
PIHOA Executive Office
1890 East-West Road, Moore 429
Honolulu, HI 96822
(808) 956-6224

MCHIP
MCJ-157020
10/01/90–09/30/93
Project Director(s):
Roylinne F. Wada

Women and children comprise nearly 70 percent of the estimated one-half million people who reside in the many tiny scattered island communities of the U.S.-related Pacific. Highly visible and vulnerable to health risks, the women and children have a status comparatively as poor as that of blacks and other socioeconomically disadvantaged groups residing in the continental United States, yet very little data exist that adequately define the nature of the problems or their solutions. This project by the Pacific Island Health Officers Association will assist in conducting a comprehensive, regionwide assessment of MCH programs, care patterns, unmet regional needs, and priorities; facilitate data systems development; and help adapt U.S. national health objectives to reflect uniquely Pacific circumstances and conditions.

Great Lakes Regional Genetics Group
Indiana State Board of Health
Genetic Diseases Section
Division of Maternal and Child Health
1330 West Michigan Street
Indianapolis, IN 46206-1964
(317) 633-0644

Genetics
MCJ-181003
10/01/85–09/30/91
Project Director(s):
Lorraine Matheson-Rubin

The purpose of the Great Lakes Regional Genetics Group (GLaRGG) is to continue an established genetics network for the Federal Maternal and Child Health Region V, which includes Illinois, Indiana, Michigan, Minnesota, Ohio, and Wisconsin. This network provides a forum for sharing resources and developing cooperative efforts toward improving the quality and quantity of the services for individuals with genetic diseases. The network goals and objectives are to: (1) Improve communication and coordination within MCH Region V; (2) promote the coordination of educational activities; (3) share educational and technical resources; (4) establish and implement laboratory quality assurance programs; (5) develop a uniform data base system; and (6) improve financial support for genetic services.

Great Plains Genetics Service Network
University of Iowa
Department of Pediatrics
Division of Medical Genetics
Iowa City, IA 52242
(319) 356-2674

Genetics
MCJ-191002
10/01/83–09/30/93
Project Director(s):
James W. Hanson, M.D.

The goal of the Great Plains Genetics Service Network (GPGSN) is to establish the sharing of resources, information, and expertise to enhance the quantity and quality of genetic services within the region. Regionwide committees are charged with addressing the specific problems that have been identified as critical elements in the delivery of optimal genetic services. Each committee identifies the problems within its area and adopts plans and mechanisms for resolving them on a comprehensive, regionwide basis.

New England Regional Genetics Group
Massachusetts Health Research Institute, Inc.
101 Tremont Street, Suite 600
Boston, MA 02108
(617) 426-6378

Genetics
MCJ-251003
10/01/84–09/30/93
Project Director(s):
Allen C. Crocker, M.D.
Richard W. Erbe, M.D.
Stacey T. Kacoyanis, M.S.

The purpose of the New England Regional Genetics Group is to provide a forum for the discussion of regionwide concerns regarding provision of optimal services in medical genetics; to promote the availability of high quality genetic services; to ensure that providers, consumers, and State health department personnel have the opportunity to discuss issues of mutual interest; and to encourage active genetics education throughout New England.

Genetics Network of the Empire State
New York State Department of Health and
Health Research, Inc.
Wadsworth Center for Laboratories and Research
Laboratory of Human Genetics
P.O. Box 509
Albany, NY 12201
(518) 474-6796

Genetics
MCJ-361004
10/01/85–09/30/92
Project Director(s):
Ann M. Willey, Ph.D.

The goal of this project is to ensure that individuals affected with, at risk for transmitting, or concerned about a genetic disorder are able to make informed health decisions and are provided access to comprehensive genetic services that include diagnostic, counseling, and preventive services. There are nine objectives of the program, referencing the need for services to be located in all health service areas of the State, the comprehensive nature of services to be provided, the financial accessibility of services based on fee schedules and the reimbursement practices of providers and third-party payers, the cooperation required to eliminate duplication of services, and the continued development and application of innovative techniques in screening and diagnosis.

Pacific Northwest Regional Genetics Group
Oregon Health Sciences University
Child Development and Rehabilitation Center
P.O. Box 574
Portland, OR 97207-0574
(503) 494-8342

Genetics
MCJ-411002
10/01/85–09/30/92
Project Director(s):
Jonathan Zonana, M.D.

The Pacific Northwest Regional Genetics Group (PacNoRGG) seeks to develop a coordinated system to assure high quality genetic services and educational programs in Alaska, Idaho, Oregon, and Washington. The project goals are to: (1) Improve communication and cooperation of genetic service delivery among States within the region; (2) provide education in genetics to providers and recipients of genetic services; (3) establish national standards for quality assurance and proficiency testing of laboratories providing genetic services; and (4) develop a system of data collection and analysis of genetic services.

Texas Genetics Network
Texas Department of Health
Bureau of Maternal and Child Health
1100 West 49th Street
Austin, TX 78756-3199
(512) 458-7700

Genetics
MCJ-481005
10/01/88–09/30/92
Project Director(s):
Walter P. Peter, M.D.

The goal of this project is to decrease the impact of genetic disease in Texas and to alleviate the suffering and anxiety of patients and their families due to the threat or presence of genetic disease. The objectives of the Texas Genetics Network are to: (1) Establish a well-coordinated statewide network of high quality human genetic services for all residents of Texas; (2) develop educational programs for health care professionals, consumers of genetic services, and the lay public regarding genetic diseases and available genetic services; (3) coordinate the laboratory diagnostic capacity of existing genetics groups in the areas of biochemistry, cytogenetics, DNA diagnosis, and prenatal diagnosis to assure high quality services; (4) collect data on the provision of genetic services; and (5) increase consumer involvement in the network.

Mid-Atlantic Regional Human Genetics Network
University of Virginia Medical School
Department of Pediatrics
Division of Medical Genetics
P.O. Box 386
Charlottesville, VA 22908
(804) 924-2665

Genetics
MCJ-511002
10/01/88–09/30/93
Project Director(s):
Thaddeus E. Kelly, M.D., Ph.D.

This project pools genetic services resources within the seven-State region composed of Pennsylvania, New Jersey, Virginia, West Virginia, Maryland, Delaware, and the District of Columbia. The goal of the Mid-Atlantic Regional Human Genetics Network (MARHGN) is to increase the access to and the quality of genetic services. This is achieved through cooperative interchange among the seven member States through: (1) Education of the public and of providers of genetic services; (2) quality control of genetics laboratories; (3) data collection and analyses of genetic services; and (4) special projects. Specific objectives in each of these four areas are addressed on either a continuing basis, such as data collection, or for a limited time, such as an educational conference.

Statewide Clinical Genetic Services
Wyoming Department of Health and Social Services
Division of Health and Medical Services
Hathaway Building, Fourth Floor
Cheyenne, WY 82002-0710
(307) 777-7166

Genetics
MCJ-561001
10/01/87–09/30/91
Project Director(s):
Larry Goodmay, M.S., M.B.A.

This project's goals are to: (1) Provide instate clinical genetic services to the residents of Wyoming; (2) increase genetics awareness statewide by offering genetics education programs; and (3) coordinate all statewide genetic services, including newborn screening, cytogenetic and specialty metabolic lab services, and data collections and analyses.

General Program Concerns

Financing

Improving Health Insurance Coverage for Adolescents: Analysis, Dissemination, and Technical Assistance
Institute for Health Policy Studies
University of California at San Francisco
1326 Third Avenue, Box 0936
San Francisco, CA 94143
(415) 476-3896

MCHIP
MCJ-067026
10/01/90–09/30/91
Project Director(s):
Paul Newacheck, Dr.P.H.

The goals of this project are to: (1) Heighten awareness of adolescent health insurance problems and potential solutions among policymakers, health care professionals, educators, business groups, and parents; (2) strengthen State-level capacity to plan and implement strategies for improving financing of health services for adolescents; and (3) update and expand our knowledge base concerning the financing of health services for adolescents. Activities include conducting workshops, providing technical assistance, and publishing reports and educational materials.

General Program Concerns

Data/Information

Evaluation of the Implementation of the Medi-Cal Comprehensive Perinatal Services
University of California at San Francisco
Institute for Health Policy Studies
1388 Sutter Street, 11th Floor
San Francisco, CA 94143
(415) 476-3094

Research
MCJ-067010
04/01/89–03/31/92
Project Director(s):
Carol C. Korenbrot, Ph.D.

The goals of this project are twofold: (1) To determine whether birthweight outcomes for patients of the institutionalized Comprehensive Perinatal Services (CPS) program are significantly better than those for Medi-Cal patients receiving prenatal care in general, and (2) to determine how CPS services differ from those of both the OB Access pilot project and the prenatal services reimbursed by Medi-Cal. If the birthweight outcomes are indeed better, the characteristics of prenatal care program service delivery can be more easily and effectively replicated by others. If there are no differences in birthweight outcomes, then the differences between CPS and the OB Access service delivery at the provider and patient levels will be characterized so that, rather than dismantle the program, changes in service organization, content, delivery, and utilization can be made to improve birthweight outcomes.

Health and Nutrition of U.S. Hispanic Children
Stanford University School of Medicine
Department of Pediatrics
Stanford, CA 94305
(415) 327-4800, ext. 538

Research
MCJ-060518
04/01/85–03/31/91
Project Director(s):
Fernando S. Mendoza, M.D.

This study analyzes data from the National Health and Nutrition Examination Surveys I and II and the Hispanic Health and Nutrition Examination Survey to identify and quantify the major health and nutritional problems of Hispanic children and adolescents in the United States. Specifically, the project plans to assess the level of severity of health and nutritional problems for these population groups; identify factors related to poor health and nutrition; assess the functional implications of identified health problems; and determine how these problems are being addressed by health care programs.

Maternal and Child Health Policy Research Center
University of California at San Francisco
Institute for Health Policy Studies
1326 Third Avenue, Box 0936
San Francisco, CA 94143
(415) 476-3896

MCHIP
MCJ-067031
10/01/90–09/30/93
Project Director(s):
Paul Newacheck, Dr.P.H.

This project is designed to address information, financing, and delivery systems problems that impede access to comprehensive, family-centered, community-based care for children with special needs. Goals include: (1) Increasing the availability of information related to children with special health care needs; (2) reducing barriers to comprehensive and community-based health services associated with lack of insurance coverage or inadequate coverage; and (3) improving the capacity of health, education, and social service systems to innovate and collaborate in planning, delivering, and financing comprehensive, community-based care for all children with special health care needs.

Analytical Studies of Child Health
George Washington University
Center for Health Policy Research
2136 Pennsylvania Avenue
Washington, DC 20052
(202) 676-5258

MCHIP
MCJ-117023
10/01/90–09/30/91
Project Director(s):
Peter Budetti, M.D., J.D.

This project is intended to advance the state of knowledge with respect to the delivery and financing of appropriate child health supervision services. To accomplish this goal, the work will be organized into three major areas of child health supervision services: Access and financing; organization and delivery; and cost and effectiveness. Within each of the three major areas, the issues will be identified and studies will be considered across a developmental continuum divided into four groups: Infancy, early childhood, childhood, and adolescence. These four groups correspond with the approach being used by the Maternal and Child Health Bureau (MCHB) to develop an updated consensus on the biomedical science and the appropriate content of health supervision activities.

Assessment of MCH/CC Activities
Public Health Foundation
1220 L Street, N.W.
Suite 350
Washington, DC 20005
(202) 898-5600

MCHIP
MCJ-117002
10/01/88–06/30/91
Project Director(s):
James T. Dimas, M.P.A.

This project seeks to provide an analysis of the Public Health Foundation's ASTHO (Association of State and Territorial Health Officials) Reporting System FY 1987–88 data related to services and expenditures of the Nation's State maternal and child health and children with special health needs programs, and to prepare reports about these data. In addition, the foundation publishes information on the Nation's public health agencies and responds to special data requests from the U.S. Public Health Service, Congress, State and local health agencies, and other public health organizations.

Developing Policies to Promote Healthy Families: A Focus on Promoting Adolescent Health
Family Impact Seminar/American Association of
Marriage and Family Therapists Research and
Education Foundation
1717 K Street, N.W., Suite 407
Washington, DC 20006
(202) 429-1825

MCHIP
MCJ-113002
10/01/88–09/30/92
Project Director(s):
Theodora Ooms

The goal of this project is to improve family involvement in adolescent health through providing the best information available about the family's role, exemplary program models, and supportive policies to staff at the Federal and State levels. The program will include three separate but related activities conducted over 3 years: (1) Federal policy seminars, (2) background state-of-the-art reports, and (3) replication of seminars in selected States. An estimated 500 Federal and 1,000 State policy staff will benefit directly from the project's activities.

Healthy Mothers, Healthy Babies
American College of Obstetricians and Gynecologists
409 12th Street, S.W., Suite 309
Washington, DC 20024-2188
(202) 863-2458

MCHIP
MCJ-116019
02/01/89–01/31/92
Project Director(s):
Lori Cooper

The health care community's increasing interest in preventing low birthweight, and the growing use of community organization as a response to public health problems, have converged in a growing demand for models of collaborative effort to improve maternal and child health. The Healthy Mothers, Healthy Babies Coalition will continue to (1) facilitate collaborative efforts with health care providers, administrators, and educators; (2) provide technical assistance and information about health resources for professionals in the field; and (3) improve the cooperative effort of communities and providers who are concerned about improving the health of children in the United States.

National Center for Education in Maternal and Child Health
Georgetown University
38th and R Streets, N.W.
Washington, DC 20057
(202) 625-8400

MCHIP
MCU-117007
08/01/90–07/31/95
Project Director(s):
Robert C. Baumiller, S.J., Ph.D.
Rochelle Mayer, Ed.D.

The goal of this project is to contribute to the maintenance and improvement of the health status of mothers and children by providing comprehensive and current MCH-related information services and technical assistance to all agencies, organizations, and individuals with maternal and child health interests, with particular emphasis on those involved in or related to Title V programs. The project maintains an MCH reference collection, a SPRANS data base, and information on over 1,000 MCH-related organizations. Publications include the *MCH Program Interchange* and a variety of directories, resource guides, and conference proceedings.

Midwest Maternal and Child Health Data Improvement Project
University of Illinois at Chicago
School of Public Health
2035 West Taylor Street
Chicago, IL 60612
(312) 996-5961 or 996-0719

MCHIP
MCJ-173590
10/1/88–09/30/91
Project Director(s):
Naomi M. Morris, M.D., M.P.H.
Joan Kennelly, R.N., M.P.H.

The Midwest MCH Data Improvement Project seeks to improve the health outcomes of the MCH populations in Regions V and VII by designing, testing, and implementing a biregional MCH data system to enhance the States' capacities to formulate policy and programmatic strategies. The project will work to correct the current fragmentation of health system data by creating the infrastructure necessary to develop and maintain uniform minimum data sets and program/health outcome indicators for MCH populations and programs; define and test a system for transferring data from the States to the central data base; and field-test selected indicators using a sample from the multistate MCH data base.

AAUAP/MCH Consortium and AAUAP Database System
American Association of University Affiliated Programs
for Persons with Developmental Disabilities
8630 Fenton Street, Suite 410
Silver Spring, MD 20910
(301) 588-8252

Training
MCJ-009129
07/01/89–06/30/92
Project Director(s):
William E. Jones, Ph.D.

This goal of the AAUAP/MCH Consortium is to promote and strengthen working relationships between UAPs and State Title V programs. Additional project goals and objectives related to the AAUAP Database System will be achieved with the direct involvement and approval of the AAUAP Board of Directors, the AAUAP Database Committee, the AAUAP Policy Analysis and Evaluation Committee, and other related committees and individuals designated by the AAUAP Board of Directors.

Development of a Child Health Status Measure
Johns Hopkins University
School of Hygiene and Public Health
Hampton House, Fourth Floor
624 North Broadway
Baltimore, MD 21205-1901
(301) 955-3737

MCHIP
MCJ-247024
10/01/90–09/30/91
Project Director(s):
Barbara Starfield, M.D., M.P.H.

The overall goal of this project is to develop a multifaceted measure of health status for children ages 5–10 and 11–17. The goals of the health status measure are to: (1) Adequately document the state of child health in designated populations and identify systematic differences across major population groups; (2) monitor changes in child health that may occur as a result of social or medical phenomena; (3) serve as a standardized medical history assessment; (4) evaluate the impact of health services on health status, and provide explanation of any differences; (5) determine the nature and extent of differences in child health status in countries with markedly different approaches to child health services. The project's second phase will include prototype questionnaires for each age group for self-administration, assess the general feasibility, develop scaling and scoring options, and conduct a preliminary assessment of reliability.

National Adolescent Health Resource Center
University of Minnesota
Adolescent Health Program
Box 721 UMHC
Harvard Street at East River Road
Minneapolis, MN 55455
(612) 626-2726

MCHIP
MCJ-273A03
10/01/90–09/30/95
Project Director(s):
Michael D. Resnick, Ph.D.

The objectives of the National Adolescent Health Resource Center include: (1) Conducting comprehensive health surveys in targeted States or regions of the county using a well-established instrument (the Adolescent Health Survey); (2) providing standardized template reports to participating districts and a composite statewide report; (3) convening 2-day dissemination conferences in each participating State focusing on the documented health and risk behaviors of the adolescent population, examining model interventions, and formulating action plans to act on priority health issues; and (4) developing or strengthening collaborative relationships between departments of health and education to conduct the surveys and disseminate results.

Planning Proposal for a National Survey of Children with Special Health Needs
Albert Einstein College of Medicine
1300 Morris Park Avenue
Bronx, NY 10461
(212) 918-5304

MCHIP
MCJ-367007
10/01/88–03/31/92
Project Director(s):
Ruth E. K. Stein, M.D.

The purpose of this project is to establish and implement a planning mechanism for a new population-based survey of children in the United States who have special health needs. It will involve designing, planning, and piloting a national cross-sectional survey that will provide the data base and framework for the development and monitoring of a system of regionalized and community-based service. This will allow for the addition of longitudinal and/or sequential cross-sectional surveys in the future.

Health and Education Collaboration for Children with Handicaps
University of North Carolina at Chapel Hill
Department of Maternal and Child Health
Rosenau Hall
Chapel Hill, NC 27599
(919) 966-5983

MCHIP
MCJ-375031
10/01/88–09/30/91
Project Director(s):
Anita M. Farel, Dr.P.H.

The purpose of this project is to promote interagency collaboration and coordination among State Programs for Children with Special Health Care Needs, Part H lead agencies, and State education agencies in DHHS Region IV by improving the collection and use of data that will support program planning, monitoring, and evaluation. Specifically, the objectives of this project are to: (1) Develop an Infants and Toddlers Model Data Set to improve the ability of State programs for children with special health care needs to identify children in need of services; (2) design a protocol for sharing data among State Programs for Children with Special Health Care Needs in order to monitor the health and developmental status of the target population; and (3) promote interprogram communication regarding data collection and use among State programs, and improved reporting and information management systems.

General Program Concerns

Overcoming Ethnocultural Barriers to Genetic Services

Overcoming Ethnocultural Barriers to Genetic Services
University of California at San Francisco
San Francisco General Hospital
Department of Obstetrics, Gynecology, and Reproductive Sciences
1001 Potrero Avenue, Room 6D-23
San Francisco, CA 94110
(415) 821-8358

Genetics
MCJ-061012
10/01/90–09/30/93
Project Director(s):
Mitchell S. Golbus, M.D.
William R. Crombleholme, M.D.

The goals of the project are to: (1) Identify innovative and culturally appropriate techniques to overcome barriers to genetic services among diverse ethnic groups unfamiliar with Western culture and medical technology; (2) become a national resource for cross-cultural health care interventions by disseminating the information obtained for the benefit of providers serving similar populations; and (3) provide outreach concerning the significance and availability of genetic counseling services to the different ethnic communities of the San Francisco General Hospital (SFGH) catchment area.

Southeast Asian Developmental Disabilities Project
San Diego–Imperial Counties
Developmental Services, Inc.
4355 Ruffin Road, Suite 205
San Diego, CA 92123
(619) 576-2965

Genetics
MCJ-061010
10/01/89–09/30/92
Project Director(s):
James O. Cleveland, Ed.D.

The Southeast Asian Developmental Disabilities Project (SEADD II) will develop a model program to reduce the ethnocultural barriers and enhance the availability and utilization of genetic and other maternal and child health services for the Southeast Asian refugee populations in San Diego County, California. The project will have an impact on this target population in respect to increasing the understanding, acceptance, and utilization of Western health care services. The project will enhance the understanding and sensitivity level of primary and secondary health care providers to the cultural practices, attitudes, and health care needs of this target population. The project will also demonstrate the effectiveness of the model program at two additional sites where similar populations reside.

Utilization of Genetic Services by the Latino/ Puerto Rican Community
University of Connecticut Health Center
Department of Pediatrics
Division of Human Genetics
Farmington, CT 06032
(203) 674-1465

Genetics
MCJ-091004
10/01/90–09/30/93
Project Director(s):
Robert M. Greenstein, M.D.

In order to increase and improve the utilization and accessibility of available genetic services by the Hispanic/Puerto Rican community in the greater Hartford area, this project will: (1) Create program material and a training methodology that identifies and addresses specific ethnocultural needs for genetic services by the Hispanic/Puerto Rican community; (2) assist targeted community-based prenatal service providers to increase their utilization of clinical genetic services, particularly by the Hispanic/Puerto Rican community; and (3) replicate and disseminate the project outcomes and educational products on a statewide, regional, and national level.

Accessing the Health Care Delivery System for Infants from Ethnocultural Populations
Florida Department of Health and Rehabilitative Services
Children's Medical Services
1311 Winewood Avenue
Building 5, Room 138
Tallahassee, FL 32399-0700
(904) 488-1459

Genetics
MCJ-121004
10/01/90–09/30/93
Project Director(s):
Jennifer Carnes, R.N.

The goal of this project is to improve the health status and followup of infants from ethnocultural families identified through the Florida Genetic and Infant Screening Program by maximizing utilization of existing health resources and improving coordination of services in south Florida. In addition, the project will provide comprehensive health care and targeted case management to infants during their first year of life by health professionals under contract with the Florida Department of Health and Rehabilitative Services (HRS) regional hematology treatment centers. A comprehensive education program identifying the special needs of infants from ethnocultural populations will be implemented for the private and public sector.

Southeast Asian Birthing and Infancy Project
Massachusetts Health Research Institute
101 Tremont Street
Boston, MA 02108
(617) 522-3700, ext. 461

Genetics
MCJ-251008
10/01/89–09/30/92
Project Director(s):
Jennifer Cochran, M.P.H.

The primary goal of this project is to reduce barriers and increase access to prenatal, genetic, and other maternal/infant health services and information for Southeast Asian (SEA) refugees in Lowell. Project objectives include: (1) Providing specific services to SEA women to facilitate access to care; (2) conducting health education activities in native SEA languages; (3) developing a plan to reduce institutional barriers; (4) facilitating appropriate referrals to genetic services; (5) providing followup for pregnant Southeast Asian women identified with thalassemia or another hemoglobinopathy; (6) exploring the development of a comprehensive thalassemia/hemoglobinopathy screening and followup program; and (7) improving the rate of adequate prenatal care utilization at Lowell General Hospital Prenatal Clinic.

Vision Screening Project for Deaf Students
Minneapolis Children's Medical Center
2525 Chicago Avenue, South
Minneapolis, MN 55404
(612) 863-5818

Genetics
MCJ-271002
10/01/89–09/30/92
Project Director(s):
Sandra L.H. Davenport, M.D.

The goals of this project are to: (1) Establish a pilot project to identify potential deaf-blindness among deaf students in three types of school settings; (2) perform genetic diagnosis and counseling of deaf students participating in the study and make genetic services available to deaf students and adults; (3) test the hypothesis that a questionnaire can accurately identify cases of congenital vestibular dysfunction; (4) participate in an interagency effort to develop effective case coordination services for deaf-blind people; (5) participate in an interagency effort to develop a more effective system of rendering psychological and psychosocial support services to deaf-blind individuals and their families; and (6) educate deaf students and adults about genetics and educate professionals about the causes and functional consequences of deaf-blindness.

Integrated Genetic Services for Montana Native Americans
Shodair Hospital
Department of Medical Genetics
P.O. Box 5539
840 Helena Avenue
Helena, MT 59604
(406) 444-7530

Genetics
MCJ-301002
10/01/89–09/30/92
Project Director(s):
Susan O. Lewin, M.D.

This program aims to provide local community-based clinical genetic services to Montana Native Americans and to provide these services in a culturally acceptable manner. In addition, education of health care providers, community members, and students concerning the scope of genetic service and the significance of genetic disease is emphasized. The program also aims to hire local genetics clinic coordinators to provide ongoing liaison and education between scheduled clinics.

Proposal to Extend and Enhance the Utilization of Existing Genetic Services by Overcoming Ethnocultural Barriers
University of Medicine and Dentistry of New Jersey
New Jersey Medical School
Division of Human Genetics
185 South Orange Avenue
Newark, NJ 07103
(201) 456-4477

Genetics
MCJ-341004
10/01/88–09/30/91
Project Director(s):
Franklin Desposito, M.D.

The purpose of this project is to improve the medical care of immigrant populations in Atlantic City, Camden, and Trenton, New Jersey, who face numerous barriers posed by their ethnocultural, language/communications, and financial backgrounds. A detailed system of strategies involving educational materials which are linguistically and culturally sensitive; audiovisual aids; bilingual genetic screening forms; translator selection, training, and utilization; and intercultural workshops has been developed to assist the local genetic services programs in overcoming these barriers to access.

Indigenous Model for Enhancing Access to Genetic and Maternal and Child Health Services for Southeast Asian Refugee Populations
Ohio State University
200 Pomerene Hall
217 Neil Avenue
Columbus, OH 43210
(614) 292-8345

Genetics
MCJ-391004
10/01/90–09/30/93
Project Director(s):
Moon S. Chen, Jr., Ph.D.

The goals of this project are to initiate, implement, and evaluate the effectiveness of an indigenous model for reducing barriers and enhancing the utilization of genetic and other maternal and child health services for Southeast Asian refugee populations. Ten objectives related to these goals are proposed, including producing a series of 10 videotapes on selected topics in 3 Southeast Asian languages and a series of modules for U.S. health care providers to enhance their understanding of the cultural backgrounds and health needs of Southeast Asians.

Oklahoma Native American Genetic Services Program
Oklahoma State Department of Health
Maternal and Child Health Service
P.O. Box 53551
Oklahoma City, OK 73152
(405) 271-4471

Genetics
MCJ-401002
10/01/87–09/30/91
Project Director(s):
Edd D. Rhoades, M.D., M.P.H.

This project seeks to develop a coordinated network of genetic services that is culturally acceptable and financially accessible to Native Americans in Oklahoma in order to increase their utilization of genetic services. Program objectives include establishing genetic clinical services at seven selected Indian Health Services hospitals and clinics; increasing identification and referral of Oklahoma Native Americans at risk for genetic disorders or birth defects; collecting and analyzing epidemiological data on the incidence and prevalence of birth defects and genetic disorders; and developing collaborative liaisons among the genetics team, Indian Health Services, and related programs.

Comprehensive Genetic Services and Education Program for the Deaf and Hearing Impaired
St. Christopher's Hospital for Children
Medical Genetics Section
Front Street at Erie Avenue
Philadelphia, PA 19134-1905
(215) 427-4430 (voice) or 427-4433 (TDD)

Genetics
MCJ-421007
10/01/88–09/30/91
Project Director(s):
Kathleen E. Toomey, M.D.

This project has established goals to: (1) Provide on a regular and continuing basis genetic diagnostic, evaluation, and counseling services; (2) provide genetic counseling and educational sessions in American Sign Language (ASL) when needed; (3) establish the Center for Genetic and Acquired Deafness as a resource for professionals and lay persons regarding causes of deafness and educational interventions; (4) assess the impact on the family of a diagnosis of deafness in a young child; and (5) involve a genetic counseling student and a deaf or hearing-impaired college or graduate student in the center's project during a summer break and have them work together to develop an educational tool.

Increasing Numbers of Southeast Asians Receiving Comprehensive Health Services (INSEARCH)
Rhode Island Department of Health
Division of Family Health
3 Capitol Hill
Providence, RI 02908-5097
(401) 277-2312

Genetics
MCJ-441002
10/01/88–09/30/91
Project Director(s):
Peter R. Simon, M.D., M.P.H.

The goal of this project is to enhance the availability, accessibility, and utilization of genetic and other maternal and child health care services for the Southeast Asian (SEA) populations. This will be accomplished in part by developing, implementing, and evaluating the Perinatal Advocacy and Outreach Unit (PAOU), a comprehensive followup and case management tracking unit for the network of health centers serving the majority of the SEA populations. This unit will assist members of the primary and secondary care teams in meeting the specific maternal and child health care needs of this population.

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